Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

Document Page 1 of 61

| Fill in this information to identify your case: |   |                                      |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the :        |   |                                      |
| NORTHERN District ofILLINOIS(State)             |   |                                      |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

# Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | It 1: Identify Yourself   |                            |   |
|----|---|----------------------------|---|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name  |                            |   |
|    | Write the name that is on your government-issued picture identification (for example, | Tiffany First name         | First name                                    |
|    | your driver's license or  | Michelle Middle name       | Middle name                                   |
|    | passport).  | Faulkner                   | Wildle Halle                                  |
|    | Bring your picture identification to your meeting with the trustee.                   | Last name                  | Last name                                     |
|    |   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   | Tiffany                    |   |
|    | have used in the last 8 years   | First name                 | First name                                    |
|    | Include your married or   | Middle name                | Middle name                                   |
|    | maiden names.   | Hawk                       |   |
|    |   | Last name                  | Last name                                     |
|    |   | First name                 | First name                                    |
|    |   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
| 3. | Only the last 4 digits of your Social Security  | xxx - xx - <u>0004</u>     | XXX - XX                                      |
|    | number or federal<br>Individual Taxpayer<br>Identification number                     | OR                         | OR  |
|    | idenuilcation number  | 9xx - xx                   | 9xx - xx                                      |

Case 16-82280 Entered 09/28/16 15:08:10 Desc Main Filed 09/28/16 Doc 1 Page 2 of 61

Document Faulkner Tiffany Michelle Debtor 1 Case Number (if known)

|    |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|---|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names | Business name  EIN  EIN   | Business name  Business name  EIN  EIN  |
| 5. | Where you live  | Lakemoor   L   60051     City   State   ZIP Code     MCHENRY     County   | If Debtor 2 lives at a different address:    Number   Street  |
| 6. | Why you are choosing this district to file for bankruptcy.  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408 | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408 |

Case 16-82280 Entered 09/28/16 15:08:10 Filed 09/28/16 Desc Main Doc 1

Debtor 1

Tiffany Michelle Document Faulkner

Page 3 of 61 Case Number (if known)

| Pa  | Tell the Court About You  | r Bankruptcy               | Case                                      |   |   |   |   |
|-----|---|----------------------------|---|---|---|---|---|
| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under                                    | Filing for  Chap Chap Chap | Bankrupto<br>oter 7<br>oter 11<br>oter 12 | •   |   | equired by 11 U.S.C. § 342(b) for Inpage 1 and check the appropriate b  |   |
|     |   | ■ Chap                     | ter 13                                    |   |   |   |   |
| 8.  | How you will pay the fee  | local<br>yours<br>subn     | court for<br>self, you in                 | more details about h<br>may pay with cash, c  | now you may<br>ashier's chec                                      | Please check with the clerk's or pay. Typically, if you are paying ck, or money order. If your attor ttorney may pay with a credit ca   | g the fee<br>ney is                                     |
|     |   | I requests                 | uest that<br>w, a judg                    | r Individuals to Pay 7<br>my fee be waived (Y<br>le may, but is not req<br>% of the official pove | The Filling Feet<br>ou may requiuired to, wait<br>rty line that a | cose this option, sign and attack in Installments (Official Form a sest this option only if you are fill by your fee, and may do so only pplies to your family size and yoption, you must fill out the App. | ing for Chapter 7. y if your income is ou are unable to |
|     |   | Chap                       | ter 7 Filii                               | ng Fee Waived (Offic  | cial Form 103   | B) and file it with your petition.  |   |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | □ No ■ Yes.                | District _                                | NDIL  | When _  | 02/12/2014 Case Number  | 14-04306  |
|     |   |                            | _   |   |   | MM / DD / YYYY  |   |
|     |   |                            | District 1                                | NDIL  | When  | 03/22/2010 Case Number  | 10-12406  |
|     |   |                            | District _                                |   | When  | Case Number   |   |
| 10. | Are any bankruptcy cases pending or being   | ■ No                       |   |   |   |   |   |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>parter, or by<br>affiliate? | ☐ Yes.                     |   |   |   | Relationship to you Case Number, if known MM / DD / YYYY  |   |
|     | uniliate.   |                            |   |   |   | Relationship to you Case Number, if known MM / DD / YYYY  |   |
| 11. | Do you rent your residence?   | □ No.<br>■ Yes.            | Go to lin<br>Has you<br>residenc          | r landlord obtained an e  | eviction judgme   | ent against you and do you want to  | stay in your  |
|     |   |                            | □Ye                                       | o. Go to line 12.<br>s. Fill out <i>Initial Statem</i><br>s bankruptcy petition.                  | ent About an E  | viction Judgment Against You (For   | m 101A) and file it with                                |

| Debtor | Case 16-8228  1 Tiffany First Name  | Michelle  Middle Name   | Filed 09/28/16 Document Faulkner  | Entered 09/28/16 15:08:10<br>Page 4 of 61<br>Case Number (if known)                                     | Desc Main   |
|--------|---|---|---|---|---|
| Part   | Report About Any Busin  | esses You Own a   | as a Sole Proprietor  |   |   |
|        | Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it to this petition.    | Yes.  | ☐ Single Asset Real Estate ☐ Stockbroker (as defined in   | State  describe your business: s defined in 11 U.S.C. § 101(27A))  (as defined in 11 U.S.C. § 101(51B)) | Zip Code  |
|        | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).  | appropriate balance she documents  No. I a  No. I a  the Yes. I a | deadlines. If you indicate that et, statement of operations, cado not exist, follow the procedom not filing under Chapter 11.  Im filing under Chapter 11, but a Bankruptcy Code.  Im filing under Chapter 11 and ankruptcy Code. | I am NOT a small business debtor according to th  | your most recent<br>or if any of these<br>e definition in |
|        | Do you own or have any property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | No.<br>☐ Yes. W   |   | I, why is it needed?  |   |

Number

City

Street

ZIP Code

State

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

Debtor 1

Tiffany Michelle

Document

Page 5 of 61

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| <b>About Debtor</b> | 1: |
|---------------------|----|
|---------------------|----|

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing at | ou |
|--|----|
| credit counseling because of:              |    |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of:                 |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

Debtor 1 Tiffany Michelle Document Faulkner

Page 6 of 61

Case Number (if known)

| Pa  | rt 6: Answer These Questions                        | for Reporting Purposes                       |   |   |
|-----|---|--|---|---|
| 16. | What kind of debts do you have?                     |  | <b>consumer debts?</b> Consumer debts are deprimarily for a personal, family, or household                  |   |
|     |   |  | business debts? Business debts are debt estment or through the operation of the busine                      | -   |
|     |   | No. Go to line 16c.                          | source of through the operation of the busines  | SS OF INVESTMENT.   |
|     |   | Yes. Go to line 17.                          |   |   |
|     |   | 16c. State the type of debts you o           | owe that are not consumer debts or business of  | debts.  |
| 17. | Are you filing under Chapter 7?                     | No. I am not filing under Ch                 | napter 7. Go to line 18.  |   |
|     | Do you estimate that after                          |  | er 7. Do you estimate that after any exempt per are paid that funds will be available to distri             |   |
|     | any exempt property is<br>excluded and              | □No.   |   |   |
|     | administrative expenses are paid that funds will be | Yes.   |   |   |
|     | available for distribution to unsecured creditors?  |  |   |   |
| 18. | How many creditors do                               | <b>1</b> -49                                 | 1,000-5,000   | <b>25,001-50,000</b>                                      |
|     | you estimate that you owe?                          | ☐ 50-99                                      | 5,001-10,000  | 50,001-100,000  |
|     | owe?  | ☐ 100-199<br>☐ 200-999                       | 10,001-25,000   | ☐ More than 100,000                                       |
| 19. | How much do you                                     | \$0-\$50,000                                 | \$1,000,001-\$10 million  | \$500,000,001-\$1 billion                                 |
|     | estimate your assets to be worth?                   | \$50,001-\$100,000                           | \$10,000,001-\$50 million   | \$1,000,000,001-\$10 billion                              |
|     | be worth:   | \$100,001-\$500,000<br>\$500,001-\$1 million | ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million  | ☐\$10,000,000,001-\$50 billion<br>☐More than \$50 billion |
| 20. | How much do you                                     | \$0-\$50,000                                 | □ \$1,000,001-\$10 million  | □\$500,000,001-\$1 billion                                |
|     | estimate your liabilities                           | \$50,001-\$100,000                           | ☐ \$10,000,001-\$50 million   | \$1,000,000,001-\$10 billion                              |
|     | to be?  | <b>\$100,001-\$500,000</b>                   | ☐ \$50,000,001-\$100 million  | □\$10,000,000,001-\$50 billion                            |
|     |   | □ \$500,001-\$1 million                      | □ \$100,000,001-\$500 million   | ☐ More than \$50 billion                                  |
| Pa  | rt 7: Sign Below                                    |  |   |   |
| For | you   | I have examined this petition, and correct.  | I declare under penalty of perjury that the info  | ormation provided is true and                             |
|     |   |  | oter 7, I am aware that I may proceed, if eligible inderstand the relief available under each chap          |   |
|     |   |  | did not pay or agree to pay someone who is a d read the notice required by 11 U.S.C. § 342                  |   |
|     |   | I request relief in accordance with          | the chapter of title 11, United States Code, sp   | pecified in this petition.                                |
|     |   | _  | ment, concealing property, or obtaining money<br>in fines up to \$250,000, or imprisonment for u<br>d 3571. |   |
|     |   | /s/ Tiffany Michelle Fa                      |   | uture of Debtor 2   |
|     |   | orginature of Debtor 1                       | Signa   | INGIO OI DEDIOI Z   |
|     |   | Executed on09/23/2016                        |   | uted on   |
|     |   | MM / DD                                      | / YYYY  | MM / DD / YYYY  |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 7 of 61

| Debtor 1 | Tiffany    | Michelle    | Faulkner  | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | First Name | Middle Name | Last Name |                        |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Marc Adam Affolter         | Date     | Date:   | 09/28/2016 |
|----------------------------------|----------|---------|------------|
| Signature of Attorney for Debtor | _ Dute   | MM / DE | O / YYYY   |
| Marc Adam Affolter               |          |         |            |
| rinted name                      |          |         |            |
| Geraci Law L.L.C.                |          |         |            |
| Firm name                        |          |         |            |
| EE E M. 01 110 400               |          |         |            |
| 55 E. Monroe St., #3400          |          |         |            |
| Street St., #3400                |          |         |            |
| <del> </del>                     | IL       | 6060    | 3          |
| Number Street                    | IL State |         | 3<br>Code  |
| Number Street Chicago            | State    | ZIP     |            |
| Number Street  Chicago  City     | State    | ZIP     | Code       |

Entered 09/28/16 15:08:10 Desc Main Case 16-82280 Doc 1 Filed 09/28/16 Document Page 8 of 61

| Fill in this information to identify your case: |                      |                                   |                  |   |
|---|----------------------|-----------------------------------|------------------|---|
| Debtor 1  | Tiffany              | Michelle                          | Faulkner         | _ |
|   | First Name           | Middle Name                       | Last Name        |   |
| Debtor 2  |                      |                                   |                  | _ |
| (Spouse, if filing)                             | First Name           | Middle Name                       | Last Name        |   |
| United States                                   | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS (State) |   |
| Case Number<br>(If known)                       | Г                    |                                   |                  |   |

# Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: | Summarize Your Assets  |   |
|---------|--|---|
|         |  | <b>Your assets</b><br>Value of what you own |
|         | ule A/B: Property (Official Form 106A/B) by line 55, Total real estate, from Schedule A/B  | <u> </u>                                    |
| 1b. Cop | by line 62, Total personal property, from Schedule A/B   | \$ 14,959                                   |
| 1c. Cop | by line 63, Total of all property on <i>Schedule A/B</i>   | \$ 14,959                                   |
| Part 2: | Summarize Your Liabilities   |   |
|         |  | Your liabilities<br>Amount you owe          |
|         | ole D: Creditors Who Have Claims Secured by Property (Official Form 106D) by the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$18,982                                    |
|         | of the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$0<br>\$73,678                             |
| 3b. Cop | by the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | <u>Ψ13,016</u>                              |
|         |  |   |
| Part 3: | Summarize Your Liabilities   |   |
|         | vour combined monthly income from line 12 of <i>Schedule I</i>   | \$3,212.69                                  |
|         | ule J: Your Expenses (Official Form 106J) your monthly expenses from line 22c of Schedule J  | \$2,937.26                                  |

Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10

Case 16-82280 Desc Main Page 9 of 61 Document Tiffany Michelle Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name **EntriesDescription** <u>AssetsAmount</u> **LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$4,429.90 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 59,603.00

\$ 0.00

\$ 0.00

\$<u>59</u>,603.00

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

| Fill in this in  | formation to identify yo   |  |   | Entered 09/28/16<br>0 of 61                                       | 15:08:10                      | Desc I      | Main          |              |
|--|--|--|---|---|-------------------------------|-------------|---------------|--------------|
|  | Tiffany  | Michelle   | Faulkner  |   |                               |             |               |              |
| Debtor 1   | First Name   | Middle Name  | Last Name   |   |                               |             |               |              |
| Debtor 2 (Spouse, if filing)                                 | First Name   | Middle Name  | Last Name   |   |                               |             |               |              |
|  |  |  |   |   |                               |             |               |              |
| United States  | Bankruptcy Court for the : _   | <u>NORTHERN</u> Dis  | (State)   |   |                               | Пс          | heck if this  | ie an        |
| Case Number<br>(If known)                                    | Г  |  |   |   |                               | _           | mended fili   |              |
| Official F   | orm 106A/B   |  |   |   |                               |             |               | J            |
| Schedul  | e A/B: Prope   | rty  |   |   |                               |             |               | 12/15        |
| ategory where<br>esponsible for<br>ages, write yo<br>Part 1: | e you think it fits best. B<br>supplying correct infor<br>ur name and case numb<br>Describe Each Residence | e as complete an<br>mation. If more s<br>per (if known). An<br>, Building, Land, o | t an asset only once. If an asset d accurate as possible. If two mapace is needed, attach a separateswer every question.  r Other Real Esate You Own or Havin any residence, building, land | arried people are filing togethe te sheet to this form. On the to | r, both are equal             | ly          |               |              |
|  | •  | -  | f your entries fro Part 1, includin   |   |                               |             |               |              |
| you have a   | ttached for Part 1. Write  | that number her  | 'e  |   | >                             |             |               | \$0.00       |
| Part 2:  | Describe Your Vehicles   |  |   |   |                               |             |               |              |
| O3. Cars, vans No. Yes.                                      | s, trucks, tractors, sport  Describe Make:   | sutility vehicles, r   | , also report it on Schedule G: Exmotorcycles  Who has an interest in the Debtor 1 only   |   | Do not deduct s               |             | •             |              |
|  | ∕lodel:<br>⁄ear:   | 1997   | Debtor 2 only   |   | Creditors Who                 | Have Claims | Secured by Pi | roperty      |
|  | Approximate Mileage:   | 80,000   | Debtor 1 and Debtor 2 only  |   | Current value entire property |             | Current val   |              |
|  | Other information:   |  | At least one of the debtors   | and another   | \$                            | 1,407.00    | \$            | 1,407.00     |
|  |  |  | Check if this is commu<br>instructions)   | unity property (see   |                               |             |               |              |
| N  | Make:  | Nissan   | Who has an interest in the  | property? Check one.  | Do not deduct s               |             |               |              |
| N  | Model:   | Sentra   | Debtor 1 only Debtor 2 only   |   | Creditors Who                 | ,           |               |              |
| ١  | /ear:  | 2015   | Debtor 1 and Debtor 2 only  | V   | Current value                 |             | Current val   |              |
| A  | Approximate Mileage:   | 31,000   | At least one of the debtors   |   | entire property               | /?          | portion you   | ı own?       |
|  | Other information:   |  | Check if this is commu  | unity property (see   | \$                            | 3,475.00    | \$            | 13,475.00    |
| Examples: No. Yes.  Add the dol                              | Boats, trailers, motors, pers  Describe  Ilar value of the portion   | you own for all of   | recreational vehicles, other vehing vessels, snowmobiles, motorcycle a  | accessories   |                               |             |               | \$ 14,882.00 |
| you have at  | ttached for Part 2. Write  | that number her  | 'e  | >   |                               |             | L             | . ,          |

Official Form 106A/B Record # 716827 Schedule A/B: Property Page 1 of 6

Tiffany

Case 16-82280

Doc 1

Desc Main

First Name

**Describe Your Personal and Household Items** Part 3: Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions 06. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No. Describe..... 0.00 07. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games Describe..... 0.00 08. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No. Describe..... Yes 0.00 09. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No. Yes. Describe..... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No. Yes. Describe..... 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No. Yes. Describe..... 0.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No. Describe..... 0.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No. Describe..... Yes. 0.00 14. Any other personal and household items you did not already list, including any health aids you did not list Describe..... 0.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$0.00 for Part 3. Write that number here ----

Tiffany First Name

Case 16-82280 Michelle

Doc 1

Entered 09/28/16 15:08:10 Page 12 of 61 humber (if known)

Desc Main

Filed 09/28/16 Document

|     | art 4:        | rescribe rour ri    | mancial Assets  |  |  |       |
|-----|---------------|---------------------|---|--|--|-------|
| Do  | you own or    | have any lega       | l or equitable interest in any                        | r of the following?  | Current value of the portion you own?  Do not deduct secured class or exemptions | aims  |
| 16. | Cash          |                     |   |  |  |       |
|     | Examples:     | Money you have i    | in your wallet, in your home, in a s                  | safe deposit box, and on hand when you file your petition  |  |       |
|     | Yes.          | Describe            |   |  |  |       |
|     |               |                     |   |  | \$   | 0.00  |
| 17. | Deposits o    | •                   |   | N.C. at a fide of the control of the |  |       |
|     |               |                     | If you have multiple accounts with                    | ifficates of deposit; shares in credit unions, brokerage houses, h the same institution, list each.  |  |       |
|     | Yes.          | Describe            | Account Type:   | Institution name:  |  |       |
|     | <del></del>   |                     | Savings Account                                       | Fifth Third  | \$   | 2.00  |
|     |               |                     | Other financial account                               | Pre-paid debit   | <u> </u>   | 5.00  |
|     |               |                     | Checking Account                                      | Chase  | <u> </u>   | 20.00 |
|     |               |                     | Checking Account                                      | Fifth Third  | <u> </u>   | 50.00 |
|     |               |                     |   |  |  | 77.00 |
| 18. | Bonds, mu     | tual funds, or p    | publicly traded stocks                                |  |  |       |
|     | Examples: No. | Bond funds, inves   | stment accounts with brokerage fir                    | rms, money market accounts   |  |       |
|     | Yes.          | Describe            | Institution or issuer name:                           |  |  |       |
| 40  | Non mublic    | lu tuadad ataal     |   | and and universal programmes in alternative an internative   | \$   | 0.00  |
| 19. |               | ily traded Stoci    | k and interests in incorporat                         | ed and unincorporated businesses, including an interest in   |  |       |
|     | No.           | Dagariba            | Name of Entity and Percent                            | t of Ownership:  |  |       |
|     | Yes.          | Describe            | Name of Littly and Fercent                            | tor Ownership.   | •  | 0.00  |
| 20. | Negotiable    | instruments inclu   | de personal checks, cashiers' che                     | ole and non-negotiable instruments ecks, promissory notes, and money orders. omeone by signing or delivering them.   |  |       |
|     | Yes.          | Describe            | Issuer name:  |  | \$   | 0.00  |
| 21. | Retirement    | or pension ac       | counts  |  |  |       |
|     | Examples:     | Interests in IRA, E | ERISA, Keogh, 401(k), 403(b), thri                    | ift savings accounts, or other pension or profit-sharing plans   |  |       |
|     | Yes.          | Describe            | Type of account and Institut                          |  |  |       |
|     |               |                     | Pension plan  | Pension  |  | 0.00  |
|     |               |                     |   |  | \$   | 0.00  |
| 22. | Your share    |                     | osits you have made so that you                       | may continue service or use from a company ities (electric, gas, water), telecommunications  |  |       |
|     | Yes.          | Describe            | Institution name or individua                         | al:  |  |       |
| 23. | Annuities (   | A contract for      | a periodic payment of mone                            | ey to you, either for life or for a number of years)   | \$   | 0.00  |
|     | Yes.          | Describe            | Issuer name and description                           | n:   |  |       |
|     |               |                     |   |  | \$   | 0.00  |
| 24. |               |                     | IRA, in an account in a quali<br>A(b), and 529(b)(1). | ified ABLE program, or under a qualified state tuition program.  |  |       |
|     | Yes.          | Describe            | Institution name and descrip                          | otion. Separately file the records of any interests.11 U.S.C. § 521(c):  | ¢  | 0.00  |
| 25. | Trusts, equ   | uitable or futur    | e interests in property (other                        | r than anything listed in line 1), and rights or powers  | Ψ  |       |
|     | Yes.          | Describe            |   |  | \$   | 0.00  |
|     |               |                     |   |  |  |       |

Tiffany

Case 16-82280 Michelle

Filed 09/28/16
Document
Last Name Doc 1

Desc Main

First Name Middle Name

Entered 09/28/16 15:08:10 Page 13 of 61 umber (if known)

| 26. | -            |  | marks, trade secrets, and other intellectual property  |   |                |
|-----|--------------|--|--|---|----------------|
|     | No.          | nternet domain nai                       | mes, websites, proceeds from royalties and licensing agreements  |   |                |
|     | Yes.         | Describe                                 |  | \$  | 0.00           |
| 27. | Licenses, f  | ranchises, and                           | other general intangibles  | -   |                |
|     | Examples: E  | Building permits, ex                     | cclusive licenses, cooperative association holdings, liquor licenses, professional licenses  |   |                |
|     | Yes.         | Describe                                 |  | \$  | 0.00           |
| Мо  | ney or prope | erty owed to you                         | ı?   | Current value of the                                | ne             |
|     |              |  |  | portion you own? Do not deduct secure or exemptions | d claims       |
| 28. | Tax refunds  | s owed to you                            |  |   |                |
|     | Yes.         | Describe                                 |  | \$  | 0.00           |
| 29. | Examples: F  | -  | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement   |   |                |
|     | Yes.         | Describe                                 | Debtor is owed past-due child support.   | \$ <u> </u>   | <u>Jnknown</u> |
| 30. | Examples: l  |  | wes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, d loans you made to someone else |   |                |
|     | Yes.         | Describe                                 |  | \$  | 0.00           |
| 31. |              | nsurance polici                          |  |   |                |
|     | No.          |  | r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  Company Name & Beneficiary:                  |   |                |
|     | Yes.         | Describe                                 | Company Name & Beneficiary.  |   |                |
| 32. | Any interes  | t in property th                         | at is due you from someone who has died  | \$  | 0.00           |
|     | -            | e beneficiary of a l<br>cause someone ha | iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive is died.                                 |   |                |
|     | Yes.         | Describe                                 |  | \$  | 0.00           |
| 33. | _            | -  | s, whether or not you have filed a lawsuit or made a demand for payment nent disputes, insurance claims, or rights to sue                | ·   |                |
|     | Yes.         | Describe                                 |  | \$  | 0.00           |
| 34. | Other conti  | ngent and unliq                          | uidated claims of every nature, including counterclaims of the debtor and rights   | ¥   |                |
|     | Yes.         | Describe                                 |  | ¢   | 0.00           |
| 35. | Any financi  | ial assets you d                         | id not already list  | Ψ   |                |
|     | Yes.         | Describe                                 |  |   |                |
|     | 163.         | 20001106                                 |  | \$  | 0.00           |
|     |              |  | of your entries from Part 4, including any entries for pages you have attached   |   | \$77.00        |
|     |              |  |  |   | <u></u>        |

Tiffany

Doc 1

Filed 09/28/16 Entered 09/28/16 15:08:10

Document Page 14 of a lumber (if known)

Desc Main

0.00

No. Yes.

Describe.....

Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Yes. Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned No. Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Describe..... 0.00 41. Inventory No. Describe..... 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations Yes. Describe..... 0.00 44. Any business-related property you did not already list No. Yes. Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Yes. Describe..... 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Describe..... Yes. 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

| 50. Farm and fishing supplies, chemicals, and feed No.  |              |                |
|---|--------------|----------------|
| Yes. Describe   |              | \$ 0.00        |
| 51. Any farm- and commercial fishing-related property you did not already list  |              |                |
| No.  Yes. Describe  |              |                |
|   |              | <u>\$</u> 0.00 |
| 52. Add the dollar value of all of your entries from Part 6, including any entries for for Part 6. Write that number here |              | \$0.00         |
|   | 4.00         |                |
| Part 7: Describe All Property You Own or Have an Interest in That You Did Not Lis   | ST ADOVE     |                |
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership    |              |                |
| No.  Yes. Describe  |              |                |
|   |              | \$0.00         |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here                                       | >            | \$0.00         |
| Part 8: List the Totals of Each Part of this Form   |              |                |
| 55. Part 1: Total real estate, line 2   |              | \$ 0.00        |
| 56. Part 2: Total vehicles, line 5  | \$ 14,882.00 |                |
| 57. Part 3: Total personal and household items, line 15   | \$ 0.00      |                |
| 58. Part 4: Total financial assets, line 36   | \$ 77.00     |                |
| 59. Part 5: Total business-related property, line 45  | \$ 0.00      |                |
| 60. Part 6: Total farm- and fishing-related property, line 52   | \$ 0.00      |                |
| 61. Part 7: Total other property not listed, line 54  | \$ 0.00      |                |
| 62. <b>Total personal property.</b> Add lines 56 through 61   | \$ 14,959.00 | \$ 14,959.00   |
|   |              |                |
| 63. <b>Total of all property on Schedule A/B.</b> Add line 55 + line 62   |              | \$14,959.00    |
|   |              |                |

Official Form 106A/B Record # 716827 Schedule A/B: Property Page 6 of 6

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

| Fill in this in     | Fill in this information to identify your case: |                                     |           |  |  |  |
|---------------------|---|-------------------------------------|-----------|--|--|--|
| Debtor 1            | Tiffany   | Michelle                            | Faulkner  |  |  |  |
|                     | First Name                                      | Middle Name                         | Last Name |  |  |  |
| Debtor 2            |   |                                     |           |  |  |  |
| (Spouse, if filing) | First Name                                      | Middle Name                         | Last Name |  |  |  |
| United States       | Bankruptcy Court for                            | the : <u>NORTHERN</u> District of _ |           |  |  |  |
| Case Number         | r   |                                     | (State)   |  |  |  |
| (If known)          |   |                                     |           |  |  |  |

# Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|   | emptions are you claiming? Check                       |                                      |   |                                    |  |  |  |
|---|--|--------------------------------------|---|------------------------------------|--|--|--|
| You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3) |  |                                      |   |                                    |  |  |  |
| You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)                          |  |                                      |   |                                    |  |  |  |
| 2. For any propert  | y you list on <i>Schedule A/B</i> that yo              | ou claim as exempt, fill in t        | the information below.  |                                    |  |  |  |
| ·   | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |  |  |  |
|   |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |  |  |  |
| Brief description:  | 1997 Saturn LS with over 80,000 miles.                 | \$ <u>1,407</u>                      | <b>\$</b> 2,400   | 735 ILCS 5/12-1001(c) - \$2,400.00 |  |  |  |
| Line from Schedule A/B:   | 03   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |
| Brief<br>description:   | Savings Account, Fifth Third, 2.00                     | \$_2                                 | <b></b>   | 735 ILCS 5/12-1001(b) - \$2.00     |  |  |  |
| Line from Schedule A/B:   | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |
| Brief<br>description:   | Other financial account, Pre-paid debit, 5.00          | <u>\$_5</u>                          | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$5.00     |  |  |  |
| Line from Schedule A/B:   | 17   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |
| Brief<br>description:   | Checking Account, Chase, 20.00                         | \$ 20                                | <b></b>   | 735 ILCS 5/12-1001(b) - \$20.00    |  |  |  |
| Line from Schedule A/B:   | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |
|   |  |                                      |   |                                    |  |  |  |
| Official Form 106C  | Record # 716827  | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 1 of 2                        |  |  |  |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

Page 17 of 61 Case Number (if known) Document Debtor 1 <u>Tiffan</u>y Michelle Last Name First Name Middle Name

|                            | n of the property and the co                             | Current value of the                 | Amount of the exemption   | Specific laws that allow sweet!    |
|----------------------------|--|--------------------------------------|---|------------------------------------|
|                            | n of the property and line on<br>nat lists this property | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|                            |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |
| Brief<br>description:      | Checking Account, Fifth Third, 50.00                     | \$ <u>50</u>                         | \$  | 735 ILCS 5/12-1001(b) - \$50.00    |
| Line from<br>Schedule A/B: | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief<br>lescription:      | Pension plan, Pension, 0.00                              | \$ <u>0</u>                          | <b></b>   | 735 ILCS 5/12-1006 - \$0.00        |
| ine from<br>Schedule A/B:  | 21   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| rief<br>escription:        | Debtor is owed past-due child support.                   | \$Unknown                            | <b></b>   | 735 ILCS 5/12-1001(g)(4) - \$0.00  |
| ine from<br>Schedule A/B:  | 29   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| e you claiming             | a homestead exemption of mo                              | re than \$155,675?                   |   |                                    |
| Subject to adjust          | tment on 4/01/16 and every 3 yea                         | ars after that for cases filed on    | or after the date of adjustment )                               |                                    |
| -                          | and it on the three and every e yes                      | are after that for eaces mea of      | or anor are date or adjacament.                                 |                                    |
| No.                        |  |                                      |   |                                    |
| _                          | acquire the property covered by                          | the exemption within 1,215 day       | ys before you filed this case?                                  |                                    |
| ☐ No                       |  |                                      |   |                                    |
| ☐ Yes.                     |  |                                      |   |                                    |
|                            |  |                                      |   |                                    |
|                            |  |                                      |   |                                    |
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|                            |  |                                      |   |                                    |
|                            |  |                                      |   |                                    |
|                            |  |                                      |   |                                    |
|                            |  |                                      |   |                                    |
|                            |  |                                      |   |                                    |

| Fill in this i  | nformation to ide   | ntify your case:   |  | 8 of 61   |  |  |                               |
|---|---|--|--|---|--|--|-------------------------------|
| Debtor 1  | Tiffany   | Michel   | e Faulkner   |   |  |  |                               |
| 200.01  | First Name  | Middle Name  | Last Name  |   |  |  |                               |
| Debtor 2  |   |  |  | _   |  |  |                               |
| (Spouse, if filing)   | First Name  | Middle Name  | Last Name  |   |  |  |                               |
| United States   | Bankruptcy Court f  | or the : <u>NORTHERN</u>   |  |   |  |  |                               |
| Case Numbe  | ır  |  | (State)  |   |  | Check if thi                                       | s is an                       |
| (If known)  |   |  |  |   |  | amended fi   | ling                          |
| Official F  | orm 106D  | )  |  |   |  |  |                               |
|   |   | _  |  |   |  |  | 12                            |
|   |   |  | e Claims Secured by ried people are filing together, b   |   |  |  | 12                            |
|   |   | eded, copy the Addi<br>me and case number  | tional Page, fill it out, number the (if known).   | e entries, and attach it to th  | nis form. On the top of a  | iny  |                               |
| 1. Do any cre   | editors have clair  | ns secured by your p   | roperty?   |   |  |  |                               |
| ∏ No. C   | heck this box and   | submit this form to th   | e court with your other schedules.   | You have nothing else to re   | eport on this form.  |  |                               |
|   |   |  | ,  |   |  |  |                               |
| Voc E   | ill in all of the info  | rmation below  |  | Č   |  |  |                               |
| Yes. F  | ill in all of the info  | rmation below.   |  | •   |  |  |                               |
| Yes. F  | ill in all of the info  |  |  | ·   |  |  |                               |
| Part 1:   | List All Secured C  | Claims   |  |   | Column A   | Column A   | Column C                      |
| Part 1:   | List All Secured C  | claims a creditor has more th  | an one secured claim, list the cred  | titor separately  |  | Value of collateral                                | Unsecure                      |
| Part 1:  2. List all se   | List All Secured Cocured claims. If a   | a creditor has more the  | an one secured claim, list the credit articular claim, list the other credit all order according to the creditors  | ditor separately<br>ors in Part 2.  | Column A  Amount of claim  Do not deduct the                     |  |                               |
| Part 1:  2. List all se for each of As much   | ecured claims. If a claim. If more that as possible, list the   | a creditor has more the  | articular claim, list the other credit   | ditor separately<br>ors in Part 2.<br>: name.   | Column A<br>Amount of claim                                      | Value of collateral that supports this             |                               |
| Part 1:  2. List all se for each of As much   | ecured claims. If a claim. If more that as possible, list the ge Financial SVC  | a creditor has more the  | articular claim, list the other credit<br>al order according to the creditors  | ditor separately<br>ors in Part 2.<br>name.<br>cures the claim:   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each c As much  2.1 Prestig  | ecured claims. If a claim. If more that as possible, list the ge Financial SVC  | a creditor has more the  | articular claim, list the other credit cal order according to the creditors  Describe the property that sec  | ditor separately<br>ors in Part 2.<br>name.<br>cures the claim:   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each c As much  2.1 Prestig  | ecured claims. If a claim. If more that as possible, list the period of | a creditor has more the  | articular claim, list the other credit cal order according to the creditors  Describe the property that sec  | ditor separately<br>ors in Part 2.<br>name.<br>cures the claim:   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each c As much  2.1 Prestig  Creditor's 1420 S   | ecured claims. If a claim. If more that as possible, list the Financial SVC   | a creditor has more the  | articular claim, list the other credit cal order according to the creditors  Describe the property that sec  | ditor separately ors in Part 2. cannot name. cures the claim:   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each (As much 2.1)  Prestig Creditor's 1420 S Number   | ecured claims. If a claim. If more that as possible, list the Financial SVC Name Street   | a creditor has more the none creditor has a per claims in alphabetic   | articular claim, list the other credit ral order according to the creditors  Describe the property that see 2015 Nissan Sentra with ove  | ditor separately ors in Part 2. cannot name. cures the claim:   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each c As much  2.1 Prestig  Creditor's 1420 S   | ecured claims. If a claim. If more that as possible, list the Financial SVC Name Street   | a creditor has more the  | articular claim, list the other credit cal order according to the creditors  Describe the property that see 2015 Nissan Sentra with ove  As of the date you file, the cla  | ditor separately ors in Part 2. cannot name. cures the claim:   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each of As much  2.1 Prestig  Creditor's 1420 S  Number  Salt La  City   | ecured claims. If a claim. If more that as possible, list the Financial SVC Name  Street  Ke City   | claims a creditor has more the none creditor has a page claims in alphabetic claims in alphabetic claims in alphabetic claims.  UT 84115 State Zip Code  | articular claim, list the other credit cal order according to the creditors  Describe the property that see 2015 Nissan Sentra with ove  As of the date you file, the cla  | ditor separately ors in Part 2. cannot name. cures the claim:   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each of As much  2.1 Prestig Creditor's 1420 S Number  Salt La City  Who owe                                   | ecured claims. If a claim. If more that as possible, list the Financial SVC Name Street  ke City  s the debt? Check   | claims a creditor has more the none creditor has a page claims in alphabetic claims in alphabetic claims in alphabetic claims.  UT 84115 State Zip Code  | articular claim, list the other credit cal order according to the creditors  Describe the property that see 2015 Nissan Sentra with ove  As of the date you file, the cla  Contingent Unliquidated Disputed  Nature of Lien. Check all that a  | ditor separately ors in Part 2. carnes the claim: r 31,000 miles im is: Check all that apply.   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each of As much  2.1 Prestig Creditor's 1420 S Number  Salt La City  Who owe                                   | ecured claims. If a claim. If more that as possible, list the le Financial SVC.  Name  500 W  Street  ke City  s the debt? Check. 1 only  | claims a creditor has more the none creditor has a page claims in alphabetic claims in alphabetic claims in alphabetic claims.  UT 84115 State Zip Code  | articular claim, list the other credit cal order according to the creditors  Describe the property that see 2015 Nissan Sentra with ove  As of the date you file, the cla  Contingent Unliquidated Disputed  Nature of Lien. Check all that a  | ditor separately ors in Part 2. carnes the claim: r 31,000 miles im is: Check all that apply.   | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each c As much  2.1 Prestig  Creditor's 1420 S  Number  Salt La  City  Who owe  Debtor                         | ecured claims. If a claim. If more that as possible, list the ge Financial SVC  Name  500 W  Street  ke City  s the debt? Check 1 only 2 only   | a creditor has more the none creditor has a page claims in alphabetic under the claims in alphabetic under the claims are claims in alphabetic under the claims are claims and control of the claims are creditors.  | articular claim, list the other credit cal order according to the creditors.  Describe the property that see 2015 Nissan Sentra with ove  As of the date you file, the cla  Contingent Unliquidated Disputed  Nature of Lien. Check all that a a car loan)   | ditor separately ors in Part 2. carnes the claim: r 31,000 miles  im is: Check all that apply.  | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each c As much  2.1 Prestig  Creditor's 1420 S  Number  Salt La  City  Who owe  Debtor  Debtor                 | ecured claims. If a claim. If more that as possible, list the ge Financial SVC Name Street  ke City  s the debt? Check 1 only 2 only 1 and Debtor 2 only 1  | a creditor has more the none creditor has a page claims in alphabetic unit of the claims in alphabe | articular claim, list the other credit cal order according to the creditors.  Describe the property that see 2015 Nissan Sentra with ove  As of the date you file, the cla  Contingent Unliquidated Disputed  Nature of Lien. Check all that a An agreement you made (succar loan)  Statutory lien (such as tax lien)                                | ditor separately ors in Part 2. carnes the claim: r 31,000 miles  im is: Check all that apply.  | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each c As much  2.1 Prestig  Creditor's 1420 S  Number  Salt La  City  Who owe  Debtor  Debtor                 | ecured claims. If a claim. If more that as possible, list the ge Financial SVC  Name  500 W  Street  ke City  s the debt? Check 1 only 2 only   | a creditor has more the none creditor has a page claims in alphabetic unit of the claims in alphabe | articular claim, list the other credit cal order according to the creditors.  Describe the property that see 2015 Nissan Sentra with ove  As of the date you file, the claim Contingent Unliquidated Disputed  Nature of Lien. Check all that a An agreement you made (succar loan)  Statutory lien (such as tax lient Dudgment lien from a lawsuit) | ditor separately ors in Part 2. s name. cures the claim: r 31,000 miles im is: Check all that apply.  pply. th as mortgage or secured n, mechanic's lien) | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |
| 2. List all se for each c As much  2.1 Prestig  Creditor's 1420 S  Number  Salt La  City  Who owe  Debtor  Debtor  At leas  Check | ecured claims. If a claim. If more that as possible, list the ge Financial SVC Name Street  ke City  s the debt? Check 1 only 2 only 1 and Debtor 2 only 1  | a creditor has more the none creditor has a page claims in alphabetic unit of the claims in alphabe | articular claim, list the other credit cal order according to the creditors.  Describe the property that see 2015 Nissan Sentra with ove  As of the date you file, the cla  Contingent Unliquidated Disputed  Nature of Lien. Check all that a An agreement you made (succar loan)  Statutory lien (such as tax lien)                                | ditor separately ors in Part 2. s name. cures the claim: r 31,000 miles im is: Check all that apply.  pply. th as mortgage or secured n, mechanic's lien) | Column A  Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecure<br>portion<br>If any |

|  |   |  | Filad 00/29/16  | Entered 09/28/16 15:08:10   | 0 Desc Main                          |               |
|--|---|--|---|---|--------------------------------------|---------------|
| Fill in th   | is information to identify you  | ur case:   |   | 9 of 61   |                                      |               |
| Debtor 1   | Tiffany   | Michelle   | Faulkner  |   |                                      |               |
|  | First Name  | Middle Name  | Last Name   |   |                                      |               |
| Debtor 2<br>(Spouse, if f                            |   | Middle Name  | Last Name   |   |                                      |               |
|  |   |  |   |   |                                      |               |
| United S   | tates Bankruptcy Court for the :  | <u>NORTHERN</u> District   | of <u>ILLINOIS</u> (State)  |   | Charle ii                            | E Albia ia am |
| Case Nu<br>(If known                                 |   |  |   |   | amende                               | f this is an  |
| Officia  | I Form 106E/F   |  |   |   | amende                               | a ming        |
|  | ule E/F: Creditors  |  |   |   |                                      | 12/15         |
| ist the oth<br>I/B: Prope<br>reditors w<br>eeded, co | er party to any executory co<br>rty (Official Form 106A/B) an<br>rith partially secured claims t    | ntracts or unexpired on Schedule G: Exthat are listed in Schut, number the entriename and case num | I leases that could result in<br>xecutory Contracts and Une<br>redule D: Creditors Who Haves<br>in the boxes on the left. A | s and Part 2 for creditors with NONPRIORIT a claim. Also list executory contracts on Sc. expired Leases (Official Form 106G). Do not eye Claims Secured by Property. If more sparattach the Continuation Page to this page. O       | hedule<br>include any<br>ce is       |               |
| 1. Do any  | creditors have priority unse  | ecured claims agains   | st you?   |   |                                      |               |
| No   | . Go to Part 2.   |  |   |   |                                      |               |
| Ye   |   |  |   |   |                                      |               |
| each c<br>nonpri<br>unsecu                           | laim listed, identify what type<br>ority amounts. As much as po                                     | of claim it is. If a clair<br>ssible, list the claims<br>uation Page of Part 1                     | n has both priority and nonpr<br>in alphabetical order accordi<br>. If more than one creditor ho                            | ecured claim, list the creditor separately for ea<br>iority amounts, list that claim here and show b<br>ng to the creditor's name. If you have more the<br>olds a particular claim, list the other creditors in<br>action booklet.) | ooth priority and<br>an two priority |               |
| (1 01 01   | Toxplanation of dustritype of t   | siairi, ooo tilo iiloti ao   |   | Total clai  | •                                    | Nonpriority   |
|  | List All of Your NONPRIOR   | RITY Unsecured Claim   | s   |   | amount                               | amount        |
| Part 2:  |   |  |   |   |                                      |               |
| _  | r creditors have nonpriority u  | _  | _   | a akhari a ah a di ilaa   |                                      |               |
| Ye   | . You have nothing to report i  | in this part. Submit tr  | ils form to the court with your   | other schedules.  |                                      |               |
| 4. List all nonprior include                         | of your nonpriority unsecur<br>ority unsecured claim, list the<br>ed in Part 1. If more than one of | creditor separately fo<br>creditor holds a partic  | r each claim. For each claim  | or who holds each claim. If a creditor has mo<br>listed, identify what type of claim it is. Do not l<br>itors in Part 3.If you have more than three non   | list claims already                  |               |
| Clairis  | fill out the Continuation Page  | OF AIL 2.  |   |   |                                      | Total claim   |
| 7.1  | S/SUNTRUST BANK ditor's Name  | Las  | st 4 digits of account number   | 0004  |                                      | \$_3,680.00   |
|  | Box 61047   | Wh   | en was the debt incurred?   | 2006-2016   |                                      |               |
| Nun  | nber Street   |  |   |   |                                      |               |
|  |   |  | of the date you file, the claim   | is: Check all that apply.   |                                      |               |
| Ha   | rrisburg PA   | 17106  | Contingent Unliquidated   |   |                                      |               |
| City<br><b>Who</b> (                                 | State<br>owes the debt? Check one.  | Zip Code   | Disputed  |   |                                      |               |
| De   | ebtor 1 only  |  |   |   |                                      |               |
| =  | ebtor 2 only  |  | oe of NONPRIORITY unsecure  | d claim:  |                                      |               |
| =  | ebtor 1 and Debtor 2 only least one of the debtors and another                                      |  | Student loans Obligations arising out of a sepa   | ration agreement or divorce   |                                      |               |
| =  | neck if this claim relates to a   | _  | that you did not report as priority   |   |                                      |               |
|  | ommunity debt   | _  | Debts to pension or profit-sharing  |   |                                      |               |
|  | claim subject to offest?  | _  |   |   |                                      |               |
| ■ No<br>□ Ye   |   |  | Other. Specify  |   |                                      |               |
|  |   |  |   |   |                                      |               |

Case 16-82280 Doc 1 Page 20 of 61 Case Number (if known) **Document** Tiffany Michelle Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| L   | 4.2 AES/SUNTRUST BANK                   | Last 4 digits of account number 0000   | \$ <u>0,179.00</u> |
|-----|---|--|--------------------|
| Ī   | Creditor's Name                         |  |                    |
| ı   | Po Box 61047                            | When was the debt incurred? 2005-2016  |                    |
| ı   | Number Street                           |  |                    |
| ı   | Number Street                           |  |                    |
| ı   |   | As of the date you file, the claim is: Check all that apply.   |                    |
| ı   |   | Contingent   |                    |
| ı   | Harrisburg PA 17106                     |  |                    |
| ı   | City State Zip Code                     | Unliquidated   |                    |
| ı   | Who owes the debt? Check one.           | Disputed   |                    |
| ı   | Debtor 1 only                           |  |                    |
| ı   |   | Town of MONDBIODITY  |                    |
| ı   | Debtor 2 only                           | Type of NONPRIORITY unsecured claim:   |                    |
| ı   | Debtor 1 and Debtor 2 only              | Student loans  |                    |
| ı   | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce   |                    |
| ı   | Check if this claim relates to a        | that you did not report as priority claims   |                    |
| ı   | community debt                          | Debts to pension or profit-sharing plans, and other similar de   | hte                |
| ı   | Is the claim subject to offest?         | Debts to pension of prone-sharing plans, and other similar de  |                    |
| ı   | No                                      | _  |                    |
| ı   |   | Other. Specify   | _                  |
| ļ   | Yes A FO (CLINITELICT DANK)             | 0005   | 0.544.00           |
| L   | 4.3 AES/SUNTRUST BANK                   | Last 4 digits of account number 0005   | \$ <u>8,544.00</u> |
| Ī   | Creditor's Name                         | 2000 2012  |                    |
| ı   | Po Box 61047                            | When was the debt incurred? 2006-2016  |                    |
| ı   | Number Street                           |  |                    |
| ı   |   |  |                    |
| ı   |   | As of the date you file, the claim is: Check all that apply.   |                    |
| ı   |   | Contingent   |                    |
| ı   | Harrisburg PA 17106                     | Unliquidated   |                    |
| ı   | City State Zip Code                     |  |                    |
| ı   | Who owes the debt? Check one.           | Disputed   |                    |
| ı   | Debtor 1 only                           |  |                    |
| ı   | Debtor 2 only                           | Type of NONPRIORITY unsecured claim:   |                    |
| ı   |   |  |                    |
| ı   | Debtor 1 and Debtor 2 only              | Student loans  |                    |
| ı   | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce   |                    |
| ı   | Check if this claim relates to a        | that you did not report as priority claims   |                    |
| ı   | community debt                          | Debts to pension or profit-sharing plans, and other similar de   | bts                |
| ı   | Is the claim subject to offest?         |  |                    |
| ı   | No                                      | Пан а и  |                    |
| ı   |   | Other. Specify   | _                  |
| ŀ   | Yes Americanh Leona                     |  | <b>1 500 00</b>    |
| Į   | 4.4 Americash Loans                     | Last 4 digits of account number  | \$ <u>1,500.00</u> |
|     | Creditor's Name                         |  |                    |
|     | 924 N Green Bay Rd                      | When was the debt incurred?  |                    |
|     | Number Street                           |  |                    |
|     |   | As a field and a second field an |                    |
|     |   | As of the date you file, the claim is: Check all that apply.   |                    |
|     | Markage U 2007                          | Contingent   |                    |
|     | Waukegan IL 60085                       | Unliquidated   |                    |
|     | City State Zip Code                     | Disputed   |                    |
|     | Who owes the debt? Check one.           |  |                    |
|     | Debtor 1 only                           |  |                    |
|     | Debtor 2 only                           | Type of NONPRIORITY unsecured claim:   |                    |
|     | Debtor 1 and Debtor 2 only              | Student loans  |                    |
|     | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce   |                    |
|     |   |  |                    |
|     | Check if this claim relates to a        | that you did not report as priority claims   |                    |
|     | community debt                          | Debts to pension or profit-sharing plans, and other similar de   | bts                |
|     | Is the claim subject to offest?         |  |                    |
|     | No                                      | Other. Specify PayDay Loan   |                    |
|     | Yes                                     |  | _                  |
| - 6 | _                                       |  |                    |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Page 21 of 61 Case Number (if known) **Document** Tiffany Michelle Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Capital ONE BANK USA N \$ 442.00 Last 4 digits of account number \_ Creditor's Name 2015-2016 15000 Capital One Dr When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Richmond 23238 VA Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes Capital ONE BANK USA N NULL \$ 459.00 Last 4 digits of account number 4.6 2014-2016 15000 Capital One Dr When was the debt incurred?

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

Page 22 of 61 Case Number (if known) **Pacument** Tiffany Michelle Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them be     | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim      |
|----------|--|---|------------------|
| 4.8      | City of Chicago Bureau Parking                     | Last 4 digits of account number                                   | <u>\$ 500.00</u> |
|          | Creditor's Name                                    |   |                  |
|          | PO Box 88292                                       | When was the debt incurred?                                       |                  |
|          | Number Street                                      |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          |  | Contingent  |                  |
|          | Chicago IL 60680                                   | Unliquidated  |                  |
| ١,       | City State Zip Code  Who owes the debt? Check one. | Disputed  |                  |
| l i      | Debtor 1 only                                      |   |                  |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                  |
|          | Debtor 1 and Debtor 2 only                         | Student loans   |                  |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                  |
|          | =  | that you did not report as priority claims                        |                  |
| "        | Check if this claim relates to a community debt    | Debts to pension or profit-sharing plans, and other similar debts |                  |
| l t      | s the claim subject to offest?                     |   |                  |
|          | No   | Other. Specify Debt Owed  |                  |
|          | Yes  |   |                  |
| 4.9      | Comcast Cable                                      | Last 4 digits of account number                                   | \$ <u>900.00</u> |
|          | Creditor's Name                                    |   |                  |
|          | 1701 John F. Kennedy Blvd                          | When was the debt incurred?                                       |                  |
|          | Number Street                                      |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          | Distribution DA 40400                              | Contingent  |                  |
|          | Philadelphia PA 19103                              | Unliquidated  |                  |
| v        | City State Zip Code  Who owes the debt? Check one. | Disputed  |                  |
| [        | Debtor 1 only                                      | _   |                  |
| İ        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                  |
| l i      | Debtor 1 and Debtor 2 only                         | Student loans   |                  |
| l i      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                  |
| l i      | Check if this claim relates to a                   | that you did not report as priority claims                        |                  |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                  |
| <u> </u> | s the claim subject to offest?                     |   |                  |
|          | No   | Other. Specify Cable Bill   |                  |
|          | Yes  | <del>-</del>  |                  |
| 4.10     | COMENITY BANK/Carsons                              | Last 4 digits of account number NULL                              | \$ <u>157.00</u> |
|          | Creditor's Name 3100 Easton Square Pl              | When was the debt incurred? 2016-2016                             |                  |
|          |  | when was the debt incurred:                                       |                  |
|          | Number Street                                      |   |                  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                  |
|          | Columbus OH 43219                                  | Contingent  |                  |
|          | City State Zip Code                                | Unliquidated  |                  |
| v        | Who owes the debt? Check one.                      | Disputed  |                  |
|          | Debtor 1 only                                      |   |                  |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                  |
| Ī        | Debtor 1 and Debtor 2 only                         | Student loans   |                  |
| أ        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                  |
| أ        | Check if this claim relates to a                   | that you did not report as priority claims                        |                  |
| '        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                  |
| !        | s the claim subject to offest?                     |   |                  |
|          | No   | Other. Specify Credit Card or Credit Use                          |                  |
|          | Yes  |   |                  |

Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Case 16-82280 Doc 1 Page 23 of 61 Case Number (if known) **Document** Tiffany Michelle Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| 4.11 Commonwealth Edison                          | Last 4 digits of account number7099   | \$_1,000.00      |
|---|---|------------------|
| Creditor's Name                                   |   |                  |
| 3 Lincoln Center 4th Floor                        | When was the debt incurred?   |                  |
| Number Street                                     |   |                  |
|   | As of the date you file, the claim is: Check all that apply.  |                  |
|   | Contingent  |                  |
| Oakbrook Terrace IL 60181                         | Unliquidated  |                  |
| City State Zip Code                               | Disputed  |                  |
| Who owes the debt? Check one.                     |   |                  |
| Debtor 1 only                                     |   |                  |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:  |                  |
| Debtor 1 and Debtor 2 only                        | ☐ Student loans   |                  |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce  |                  |
| Check if this claim relates to a                  | that you did not report as priority claims  |                  |
| community debt  Is the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts   |                  |
| No  | Other. Specify Utility Bills/Cellular Service   |                  |
| Yes   | Other. Specify Utility Bills/Cellular Service   |                  |
| 4.12 Credit ONE BANK NA                           | Last 4 digits of account number NULL  | \$_0.00          |
| Creditor's Name                                   | <del></del>   |                  |
| Po Box 98875                                      | When was the debt incurred? 2011-2014   |                  |
| Number Street                                     |   |                  |
|   | As of the date you file, the claim is: Check all that apply.  |                  |
|   | Contingent  |                  |
| Las Vegas NV 89193                                | Unliquidated  |                  |
| City State Zip Code                               | Disputed  |                  |
| Who owes the debt? Check one.                     |   |                  |
| Debtor 1 only                                     |   |                  |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:  |                  |
| Debtor 1 and Debtor 2 only                        | Student loans   |                  |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce  |                  |
| Check if this claim relates to a                  | that you did not report as priority claims  |                  |
| community debt Is the claim subject to offest?    | Debts to pension or profit-sharing plans, and other similar debts   |                  |
| No  | Other. Specify Credit Card or Credit Use  |                  |
| Yes   | Other. Specify  |                  |
| 4.13 First Premier BANK                           | Last 4 digits of account number NULL  | <b>\$_412.00</b> |
| Creditor's Name                                   |   |                  |
| 601 S Minnesota Ave                               | When was the debt incurred? 2016-2016   |                  |
| Number Street                                     |   |                  |
|   | As of the date you file, the claim is: Check all that apply.  |                  |
|   | Contingent  |                  |
| Sioux Falls SD 57104                              | Unliquidated  |                  |
| City State Zip Code Who owes the debt? Check one. | Disputed  |                  |
| Debtor 1 only                                     |   |                  |
|   | T (NONDRIGDITY  |                  |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:  |                  |
| Debtor 1 and Debtor 2 only                        | Student loans  Obligations assisted a concretion agreement or diverse   |                  |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce  |                  |
| Check if this claim relates to a community debt   | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts |                  |
| Is the claim subject to offest?                   | L Debie to pension or pront-snaming plans, and other similar debits   |                  |
| No  | Other. Specify Credit Card or Credit Use  |                  |
| Yes   | Caron. Specify  |                  |

Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Case 16-82280 Page 24 of 61 **Document** Tiffany Michelle Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** \$ 1,000.00 Last 4 digits of account number \_ Creditor's Name

| 724 W Washington Blvd                              | When was the debt incurred?   |
|--|---|
| Number Street                                      |   |
|  | As of the date you file, the claim is: Check all that apply.        |
|  |   |
| Chicago IL 60661                                   | Contingent  |
| City State Zip Code                                | Unliquidated  |
| Who owes the debt? Check one.                      | Disputed  |
| Debtor 1 only                                      |   |
| Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                                |
| Debtor 1 and Debtor 2 only                         | Student loans   |
| At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce        |
|  | that you did not report as priority claims                          |
| Check if this claim relates to a community debt    | Debts to pension or profit-sharing plans, and other similar debts   |
| Is the claim subject to offest?                    | Debts to pension of profit-straining plans, and other similar debts |
| No   | Other. Specify PayDay Loan  |
| Yes  | Other. Specify taybay Loan  |
| 4.15 Illinois State Toll Hwy Auth                  | Last 4 digits of account number \$ 3,000.00                         |
| Creditor's Name                                    |   |
| 2700 Ogden Ave.                                    | When was the debt incurred?   |
| Number Street                                      |   |
|  |   |
|  | As of the date you file, the claim is: Check all that apply.        |
| Downers Grove IL 60515-1703                        | Contingent  |
| City State Zip Code                                | Unliquidated  |
| Who owes the debt? Check one.                      | Disputed  |
| Debtor 1 only                                      |   |
| Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                                |
| Debtor 1 and Debtor 2 only                         | Student loans   |
|  | Obligations arising out of a separation agreement or divorce        |
| At least one of the debtors and another            | that you did not report as priority claims                          |
| Check if this claim relates to a                   |   |
| community debt Is the claim subject to offest?     | Debts to pension or profit-sharing plans, and other similar debts   |
| No   | Tour or resigned  |
| Yes  | Other. Specify Fines  |
| I/a:Ha Iall  | Last 4 digits of account number 8110 \$ 129.00                      |
| 4.16   Rettri Lueii Creditor's Name                | Last 4 digits of account number                                     |
| 736 Florsheim Dr., Ste. 12                         | When was the debt incurred? 2016                                    |
| Number Street                                      |   |
| Hamber Street                                      |   |
|  | As of the date you file, the claim is: Check all that apply.        |
| Libertyville IL 60048                              | Contingent  |
|  | Unliquidated  |
| City State Zip Code  Who owes the debt? Check one. | Disputed  |
| Debtor 1 only                                      |   |
| Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                                |
|  | Student loans   |
| Debtor 1 and Debtor 2 only                         |   |
| At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce        |
| Check if this claim relates to a                   | that you did not report as priority claims                          |
| community debt                                     | Debts to pension or profit-sharing plans, and other similar debts   |
| Is the claim subject to offest?                    | Madical Dakt  |
| Yes  | Other. Specify Medical Debt   |
| L_I Yes  |   |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

Page 25 of 61 Tiffany Michelle Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

| After | listing any entries on this page, number them be  | eginning with 4.4, followed by 4.5, and so forth.   | Total Claim        |
|-------|---|---|--------------------|
| 4.17  | Lakemoor Dental PC                                | Last 4 digits of account number   | \$ <u>387.00</u>   |
| 11.17 | Creditor's Name                                   |   |                    |
|       | 28956 W Rt. 120                                   | When was the debt incurred?   |                    |
|       | Number Street                                     |   |                    |
|       |   | As of the date you file, the claim is: Check all that apply.  |                    |
|       |   | Contingent  |                    |
|       | Lakemoor IL 60051                                 | Unliquidated  |                    |
|       | City State Zip Code                               | Disputed  |                    |
|       | Who owes the debt? Check one.                     |   |                    |
|       | Debtor 1 only                                     | T (NONDRIADITY  |                    |
|       | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:  Student loans   |                    |
|       | Debtor 1 and Debtor 2 only                        |   |                    |
|       | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce  |                    |
|       | Check if this claim relates to a community debt   | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts |                    |
|       | Is the claim subject to offest?                   | Debts to pension or profit-straining plans, and other similar debts   |                    |
|       | No  | Other. Specify  |                    |
|       | Yes   | Other. Specify  |                    |
| 4.18  | Navient   | Last 4 digits of account number 1114  | <u>\$ 2,237.00</u> |
|       | Creditor's Name                                   | 0000 0044   |                    |
|       | Po Box 9500                                       | When was the debt incurred? 2006-2014   |                    |
|       | Number Street                                     |   |                    |
|       |   | As of the date you file, the claim is: Check all that apply.  |                    |
|       |   | Contingent  |                    |
|       | Wilkes Barre PA 18773                             | Unliquidated  |                    |
|       | City State Zip Code Who owes the debt? Check one. | Disputed  |                    |
|       | Debtor 1 only                                     |   |                    |
|       | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:  |                    |
|       | Debtor 1 and Debtor 2 only                        | Student loans   |                    |
|       | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce  |                    |
|       |   | that you did not report as priority claims  |                    |
|       | Check if this claim relates to a community debt   | Debts to pension or profit-sharing plans, and other similar debts   |                    |
|       | Is the claim subject to offest?                   |   |                    |
|       | No  | Other. Specify  |                    |
|       | Yes   |   |                    |
| 4.19  | Navient   | Last 4 digits of account number 0913  | <b>\$</b> 6,629.00 |
|       | Creditor's Name                                   | When was the debt incurred? 2005-2014   |                    |
|       | Po Box 9500                                       | When was the debt incurred? 2005-2014   |                    |
|       | Number Street                                     |   |                    |
|       |   | As of the date you file, the claim is: Check all that apply.  |                    |
|       | NATIU - D   | Contingent  |                    |
|       | Wilkes Barre PA 18773                             | Unliquidated  |                    |
|       | City State Zip Code Who owes the debt? Check one. | Disputed  |                    |
|       | Debtor 1 only                                     |   |                    |
|       | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:  |                    |
|       | Debtor 1 and Debtor 2 only                        | Student loans   |                    |
|       | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce  |                    |
|       | Check if this claim relates to a                  | that you did not report as priority claims  |                    |
|       | community debt                                    | Debts to pension or profit-sharing plans, and other similar debts   |                    |
|       | Is the claim subject to offest?                   | <b>—</b>  |                    |
|       | Yes   | Other. Specify  |                    |
| _     |   |   |                    |

Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Case 16-82280 Doc 1 Page 26 of 61 Case Number (if known) **Document** Tiffany Michelle Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 

| 4.20 | Navient  | Last 4 digits of account number 1004   | \$ <u>30,334.00</u> |
|------|--|--|---------------------|
|      | Creditor's Name                                    |  |                     |
|      | Po Box 9500  | When was the debt incurred? 2005-2014  |                     |
|      | Number Street                                      |  |                     |
|      | Number Street                                      |  |                     |
|      |  | As of the date you file, the claim is: Check all that apply.   |                     |
|      |  | Contingent   |                     |
|      | Wilkes Barre PA 18773                              |  |                     |
|      |  | Unliquidated   |                     |
| Ι,   | City State Zip Code  Who owes the debt? Check one. | Disputed   |                     |
|      |  |  |                     |
|      | Debtor 1 only                                      |  |                     |
|      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                     |
| i    | = '  | Student loans  |                     |
|      | Debtor 1 and Debtor 2 only                         | - <b></b>  |                     |
|      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                     |
|      | Check if this claim relates to a                   | that you did not report as priority claims   |                     |
| '    | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                     |
|      | s the claim subject to offest?                     | Desire to periodit of profit straining plants, and strict strinial desire  |                     |
| l i  |  | _  |                     |
|      | No   | Other. Specify   |                     |
|      | Yes  |  |                     |
| 4.21 | Nicor Gas  | Last 4 digits of account number 0006   | <u>\$ 358.00</u>    |
|      | Creditor's Name                                    |  |                     |
|      | PO Box 549   | When was the debt incurred?  |                     |
|      |  | When was the dest incurred:  |                     |
|      | Number Street                                      |  |                     |
|      |  | As of the date you file, the claim is: Check all that apply.   |                     |
|      |  |  |                     |
|      | A  | Contingent   |                     |
|      | Aurora IL 60507                                    | Unliquidated   |                     |
|      | City State Zip Code                                | Disputed   |                     |
| '    | Who owes the debt? Check one.                      | Disputed   |                     |
|      | Debtor 1 only                                      |  |                     |
| i    | Debtor 2 only                                      | Turns of NONDRIORITY unassessed alaims   |                     |
|      |  | Type of NONPRIORITY unsecured claim:   |                     |
|      | Debtor 1 and Debtor 2 only                         | Student loans  |                     |
|      | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                     |
| 1 1  | ======================================             | that you did not report as priority claims   |                     |
|      | Check if this claim relates to a                   |  |                     |
| Ι.   | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                     |
|      | s the claim subject to offest?                     |  |                     |
|      | No   | Other. Specify Utility Bills/Cellular Service  |                     |
|      | Yes  |  |                     |
| 4 22 | Northwestern Medicine                              | Last 4 digits of account number 6829   | \$ 500.00           |
| 4.22 |  | Last 4 digits of account number  | ¥                   |
|      | Creditor's Name                                    | Miles and the delication of the second of th |                     |
|      | 28155 Network Pl.                                  | When was the debt incurred?  |                     |
|      | Number Street                                      |  |                     |
|      |  |  |                     |
|      |  | As of the date you file, the claim is: Check all that apply.   |                     |
|      |  | Contingent   |                     |
|      | Chicago IL 60673                                   | Unliquidated   |                     |
|      | City State Zip Code                                |  |                     |
| 1    | Who owes the debt? Check one.                      | Disputed   |                     |
| 1 1  | Debtor 1 only                                      |  |                     |
|      | <b>=</b>   |  |                     |
|      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                     |
|      | Debtor 1 and Debtor 2 only                         | Student loans  |                     |
| i    | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce   |                     |
|      |  | <del>_</del>   |                     |
|      | Check if this claim relates to a                   | that you did not report as priority claims   |                     |
|      | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts  |                     |
|      | s the claim subject to offest?                     |  |                     |
|      | No   | Other. Specify   |                     |
| i    | Yes  | Outer. Specify   |                     |
|      |  |  |                     |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

|         |            | Casc 10-02200 | DUCI |           | LITTCICU 03/20/10 13.00.10           | Desc Main |
|---------|------------|---------------|------|-----------|--------------------------------------|-----------|
| ebtor 1 | Tiffany    | Michelle      |      | Pacument  | Page 27 of 61 Case Number (if known) |           |
|         | First Name | Middle Name   |      | Last Name |                                      |           |

| Opportunity Figure 1-1                            |  | . 4 000 00         |
|---|--|--------------------|
| Opportunity Financial                             | Last 4 digits of account number  | \$ <u>1,000.00</u> |
| Creditor's Name<br>130 E. Randolph St., Ste. 1650 | When was the debt incurred?  |                    |
| Number Street                                     |  |                    |
| Trained Street                                    |  |                    |
|   | As of the date you file, the claim is: Check all that apply.   |                    |
| Chicago IL 60601                                  | Contingent   |                    |
| City State Zip Code                               | Unliquidated   |                    |
| ho owes the debt? Check one.                      | Disputed   |                    |
| Debtor 1 only                                     |  |                    |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:   |                    |
| Debtor 1 and Debtor 2 only                        | Student loans  |                    |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce   |                    |
| Check if this claim relates to a                  | that you did not report as priority claims   |                    |
| community debt                                    | Debts to pension or profit-sharing plans, and other similar debts  |                    |
| the claim subject to offest?                      |  |                    |
| No  | Other. Specify   |                    |
| Yes   |  |                    |
| The Cash Store                                    | Last 4 digits of account number  | \$ <u>1,200.00</u> |
| Creditor's Name                                   |  |                    |
| 4224 W. Elm St.                                   | When was the debt incurred?  |                    |
| Number Street                                     |  |                    |
|   | As of the date you file, the claim is: Check all that apply.   |                    |
|   | Contingent   |                    |
| Mc Henry IL 60050                                 | Unliquidated   |                    |
| City State Zip Code ho owes the debt? Check one.  | Disputed   |                    |
| ٦   |  |                    |
| Debtor 1 only                                     | - (10017707171   |                    |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:   |                    |
| Debtor 1 and Debtor 2 only                        | ☐ Student loans  |                    |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce   |                    |
| Check if this claim relates to a                  | that you did not report as priority claims   |                    |
| community debt                                    | Debts to pension or profit-sharing plans, and other similar debts  |                    |
| the claim subject to offest?                      | _  |                    |
| No<br>J.,   | Other. Specify   |                    |
| Yes Zoca Loans                                    | Last 4 digits of account number  | \$ 800.00          |
| Creditor's Name                                   | Last 4 digits of account number  | Ψ <u>σσσ.σσ</u>    |
| 27565 Research Park Dr.                           | When was the debt incurred?  |                    |
| Number Street                                     |  |                    |
| P.O. Box 1147                                     |  |                    |
| 1.0. Box 1147                                     | As of the date you file, the claim is: Check all that apply.   |                    |
| Mission SD 57555                                  | Contingent   |                    |
| City State Zip Code                               | Unliquidated   |                    |
| ho owes the debt? Check one.                      | Disputed   |                    |
| Debtor 1 only                                     |  |                    |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:   |                    |
| Debtor 1 and Debtor 2 only                        | Student loans  |                    |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce   |                    |
| Check if this claim relates to a                  | that you did not report as priority claims   |                    |
| community debt                                    | Debts to pension or profit-sharing plans, and other similar debts  |                    |
| the claim subject to offest?                      | - See to personal separation of the second series of the second s |                    |
| No  | Other. Specify   |                    |
| Yes   |  |                    |

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

Debtor 1 Tiffany

Michelle

**Pocument** 

Page 28 of 61 Case Number (if known)

<u>.......</u>

Add the Amounts for Each Type of Unsecured Claim

| 6. | Total the amounts of certain types of unsecured claims. | This information is for statistical reporting purposes only. 28 U.S.C. § 159. |
|----|---|---|
|    | Add the amounts for each type of unsecured claim.       |   |

|                             |   |            | Total claim              |
|-----------------------------|---|------------|--------------------------|
| Total claims from Part 1    | 6a. Domestic support obligations  | 6a.        | \$0.00                   |
|                             | 6b. Taxes and Certain other debts you owe the government  | 6b.        | \$0.00                   |
|                             | 6c. Claims for death or personal injury while you were intoxicated  | 6c.        | \$0.00                   |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.  | 6d.        | \$0.00                   |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e.        | \$0.00                   |
|                             |   |            |                          |
|                             |   |            | Total claim              |
| Total claims<br>from Part 2 | 6f. Student loans   | 6f.        | Total claim \$ 59,603.00 |
|                             | 6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6f.<br>6g. | 50 602 00                |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority  |            | \$ 59,603.00             |
|                             | <ul><li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li><li>6h. Debts to pension or profit-sharing plans, and other</li></ul> | 6g.        | \$\$59,603.00<br>\$0.00  |

|       |                             | C250 16             | \$ 92290 Doc 1  | Filed 00/29/16                 | Entered 09/28/16 15:08                         | :10 Desc Main       |     |
|-------|-----------------------------|---------------------|---|--------------------------------|--|---------------------|-----|
| Fill  | in this in                  | formation to ider   | ntify your case:  |                                | 9 of 61  |                     |     |
| De    | btor 1                      | Tiffany             | Michelle  | Faulkner                       |  |                     |     |
| D-    | h40                         | First Name          | Middle Name   | Last Name                      |  |                     |     |
|       | ebtor 2<br>ouse, if filing) | First Name          | Middle Name   | Last Name                      |  |                     |     |
| Un    | ited States                 | Bankruptcy Court fo | or the : <u>NORTHERN</u> District                         | t of <u>ILLINOIS</u>           |  |                     |     |
|       | se Number                   |                     |   | (State)                        |  | Check if this is an |     |
|       | known)                      | 4000                |   |                                |  | amended filing      |     |
|       |                             | orm 106G            |   |                                |  |                     | 0/4 |
|       |                             |                     |   | nd Unexpired Lea               | SES  n are equally responsible for supplying c |                     | 2/1 |
| nform | nation. If n                | nore space is nee   | eded, copy the additional p<br>ne and case number (if kno | age, fill it out, number the e | ntries, and attach it to this page. On the t   | top of any          |     |
|       |                             | •                   | contracts or unexpired leas                               | ,                              |  |                     |     |
|       | No. Ch                      | eck this box and    | submit this form to the court                             | with your other schedules. Y   | ou have nothing else to report on this form    | 1.                  |     |
|       | Yes. Fill                   | in all of the infor | mation below even if the cor                              | tracts or leases are listed in | Schedule A/B: Property (Official Form 106      | 6A/B)               |     |
| 2 Lie | et conarat                  | alv aach narson     | or company with whom yo                                   | u have the contract or lease   | . Then state what each contract or lease       | is for /for         |     |
| ех    | ample, re                   | nt, vehicle lease,  |   |                                | ruction booklet for more examples of execu     | •                   |     |
| ur    | nexpired le                 | ases.               |   |                                |  |                     |     |
| F     | Person or                   | company with w      | hom you have the contract                                 | or lease                       | State what the contract                        | or lease is for     |     |
| 2.1   | Debra B                     | siolchin            |   |                                |  |                     |     |
|       | Name<br>216 Kno             | exhoro              |   |                                |  |                     |     |
|       | Number                      | Street              |   |                                | =  |                     |     |
|       | Barringt                    | on                  | IL<br>State   | 60010<br>Zip Code              | -  |                     |     |
| 2.2   | Oity                        |                     | Otato   | Zip Gode                       |  |                     |     |
|       | Name                        |                     |   |                                | -  |                     |     |
|       | Number                      | Street              |   |                                | -  |                     |     |
|       |                             |                     |   |                                | -  |                     |     |
|       | City                        |                     | State   | Zip Code                       |  |                     |     |
| 2.3   |                             |                     |   |                                | -  |                     |     |
|       | Name                        |                     |   |                                | _  |                     |     |
|       | Number                      | Street              |   |                                |  |                     |     |
|       | City                        |                     | State   | Zip Code                       | -  |                     |     |
| 2.4   |                             |                     |   |                                |  |                     |     |
| 2.4   | Name                        |                     |   |                                | -  |                     |     |
|       |                             |                     |   |                                | -  |                     |     |
|       | Number                      | Street              |   |                                |  |                     |     |
|       | City                        |                     | State   | Zip Code                       | -  |                     |     |
| 2.5   |                             |                     |   |                                |  |                     |     |
|       | Name                        |                     |   |                                | _  |                     |     |
|       | Number                      | Street              |   |                                | -  |                     |     |

State Zip Code

City

Official Form 106G

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

| Fill in this in     | nformation to iden   | tify your case:                       |                 |
|---------------------|----------------------|---------------------------------------|-----------------|
| Debtor 1            | Tiffany              | Michelle                              | Faulkner        |
|                     | First Name           | Middle Name                           | Last Name       |
| Debtor 2            | -                    |                                       |                 |
| (Spouse, if filing) | First Name           | Middle Name                           | Last Name       |
| United States       | Bankruptcy Court for | r the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number         | r                    |                                       | (State)         |
| (If known)          |                      |                                       |                 |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A       | dditional Pages, write your name ar   | nd case number (if known). Answ          | er every question.   |   |
|-------------|---|--|----------------------|---|
| 1. <b>D</b> | o you have any codebtors? (If you a   | re filing a joint case, do not list eith | ner spouse as a code | btor.)  |
|             | No.   |  |                      |   |
|             | Yes   |  |                      |   |
|             | lithin the last 8 years, have you liverizona, California, Idaho, Lousiiana, N |  | • ,                  | unity property states and territories include and Wisconsin.) |
|             | No. Go to line 3.   |  |                      |   |
|             | Yes. Did your spouse, former spo  | use, or legal equivalent live with yo    | ou at the time?      |   |
|             |   | e or territory did you live?             | Fill ir              | n the name and current address of that person.                |
|             | Name of your spouse, former spouse or   | legal equivalent                         |                      |   |
|             |   |  |                      |   |
|             | Number Street   |  |                      |   |
|             | City  | State                                    | Zip Code             |   |
| 3           | chedule E/F, or Schedule G to fill ou   | it Column 2.                             |                      | Column 2: The creditor to whom you owe the debt               |
|             |   |  |                      | Check all schedules that apply:                               |
| 3.1         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |
| 3.2         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
| _           | City  | State                                    | Zip Code             |   |
| 3.3         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

| Fill in this in          | nformation to ident | tify your case:                  |            | 01 01                                      |
|--------------------------|---------------------|----------------------------------|------------|--|
| Debtor 1                 | Tiffany             | Michelle                         | Faulkner   |  |
| Debtor 2                 | First Name          | Middle Name                      | Last Name  |  |
| (Spouse, if filing)      | First Name          | Middle Name                      | Last Name  |  |
| United States Case Numbe |                     | the : <u>NORTHERN DISTRICT O</u> | F ILLINOIS | Check if this is:                          |
| (If known)               |                     |                                  |            | An amended filing                          |
|                          |                     |                                  |            | A supplement showing post-petition         |
|                          |                     |                                  |            | chapter 13 income as of the following date |
| fficial F                | orm 106I            |                                  |            | MM / DD / YYYY                             |

#### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa  | rt 1: Describe Employment  |                                 |                           |              |                                   |  |  |  |  |
|---|--|---------------------------------|---------------------------|--------------|-----------------------------------|--|--|--|--|
| 1.  | Fill in your employment information  |                                 | Debtor 1                  |              | Debtor 2 or non-filing spouse     |  |  |  |  |
|   | If you have more than one job, attach a separate page with information about additional employers. | Employment status               | X Employed Not employed   | 1            | Employed  Not employed            |  |  |  |  |
|   | Include part-time, seasonal, or self-employed work.  | Occupation                      | Mail Carrier              |              |                                   |  |  |  |  |
|   | Occupation may Include student or homemaker, if it applies.  | Employers name                  | USPS                      |              |                                   |  |  |  |  |
|   |  | Employers address               | 2825 Lone Oak Pa          | arkwav       |                                   |  |  |  |  |
|   |  |                                 | Eagan, MN 55121           |              | ,                                 |  |  |  |  |
|   |  |                                 |                           |              |                                   |  |  |  |  |
|   |  | How long employed there?        | 3 years                   |              |                                   |  |  |  |  |
| Pa  | Part 2: Give Details About Monthly Income  |                                 |                           |              |                                   |  |  |  |  |
|   | spouse unless you are separated.   | ve more than one employer, comb | ine the information for a |              | , Ç                               |  |  |  |  |
|   |  |                                 |                           | For Debtor 1 | For Debtor 2 or non-filing spouse |  |  |  |  |
| 2.  | List monthly gross wages, salar deductions). If not paid monthly, or                               | •                               | \$3,844.94                | \$0.00       |                                   |  |  |  |  |
| 3.  | Estimate and list monthly overti   |                                 | \$0.00                    | \$0.00       |                                   |  |  |  |  |
| 4. Calculate gross income. Add line 2 + line 3. |  |                                 |                           | \$3,844.94   | \$0.00                            |  |  |  |  |
|   |  |                                 |                           |              |                                   |  |  |  |  |

Official Form 106I Record # 716827 Schedule I: Your Income Page 1 of 2

Case 16-82280 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Doc 1 Page 32 of 61

Document Faulkner Tiffany Michelle Debtor 1 Case Number (if known)

|                 | F                    | First Name Middle Name L   | ast Name  |                       |     |                                |          |
|-----------------|----------------------|--|---|-----------------------|-----|--------------------------------|----------|
|                 |                      |  |   | For Debtor 1          |     | Debtor 2 or<br>n-filing spouse |          |
| Co              | ору                  | line 4 here  | 4.  | \$3,844.94            |     | \$0.00                         |          |
| 5. List         | all                  | payroll deductions:  |   |                       |     |                                |          |
| 5a              | a. <b>T</b>          | ax, Medicare, and Social Security deductions   | 5a.   | \$432.88              |     | \$0.0                          | 0        |
| 5b              | o. <b>M</b>          | landatory contributions for retirement plans   | 5b.   | \$150.11              |     | \$0.0                          | 0        |
| 50              | c. <b>V</b>          | oluntary contributions for retirement plans  | 5c.   | \$93.84               |     | \$0.0                          | 0        |
| 50              | d. <b>R</b>          | equired repayments of retirement fund loans  | 5d.   | \$0.00                |     | \$0.0                          | 0        |
| 5€              | e. Ir                | surance  | 5e.   | \$397.76              |     | \$0.0                          | 0        |
| 5f              | . D                  | omestic support obligations  | 5f.   | \$0.00                |     | \$0.0                          | 0        |
| 50              | g. <b>U</b>          | nion dues  | 5g.   | \$59.32               |     | \$0.0                          | 0        |
| 5h              | ո. <b>Օ</b>          | ther deductions. Specify: Life Insurance(D1),  | 5h.   | \$76.38               |     | \$0.0                          | 0        |
| 6. <b>Add</b> 1 | the                  | payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5  | f + 5g +5h. 6.  | \$1,210.28            |     | \$0.0                          | 0        |
| 7. Calcu        | ulat                 | e total monthly take-home pay. Subtract line 6 from line   | 4. 7.   | \$2,634.67            |     | \$0.00                         |          |
| 8. List a       | all c                | other income regularly received:   | '   |                       |     |                                | _        |
| 8a              | а.                   | Net income from rental property and from operating a   | business,   |                       |     |                                |          |
|                 |                      | profession, or farm  |   |                       |     |                                |          |
|                 |                      | Attach a statement for each property and business show receipts, ordinary and necessary business expenses, and   |   |                       |     |                                |          |
|                 |                      | monthly net income.  | 8a.   | \$0.00                |     | \$0.0                          | C        |
| 8b              | ٥.                   | Interest and dividends   | 8b.   | \$0.00                |     | \$0.0                          | O        |
| 80              | С.                   | Family support payments that you, a non-filing spouse dependent regularly receive  |   | \$ 578.02             |     | \$ 0.0                         | <u> </u> |
|                 |                      | Include alimony, spousal support, child support, maintena  | ance, divorce   |                       |     |                                |          |
| 0 -             |                      | settlement, and property settlement.   |   |                       |     |                                | _        |
| 80              |                      | Unemployment compensation  | 8d.   | \$0.00                |     | \$0.0                          | _        |
| 86              |                      | Social Security  | 8e.   | \$0.00                | _   | \$0.0                          | _        |
| 8f              |                      | Other government assistance that you regularly receiv  |   | \$0.00                | _   | \$0.0                          | )        |
|                 |                      | Include cash assistance and the value (if known) of any r  |   |                       |     |                                |          |
|                 |                      | assistance that you receive, such as food stamps (benefit Supplemental Nutrition Assistance Program) or housing a Specify:   | subsidies.  |                       |     |                                |          |
| 80              | <b>g</b> .           | Pension or retirement income   | <del></del><br>8g.  | \$0.00                |     | \$0.0                          | 0        |
| 8h              | า.                   | Other monthly income. Specify:   |   | \$0.00                |     | \$0.0                          | _        |
| 9. <b>A</b> d   | dd a                 | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +  | 8g + 8h. 9.   | \$578.02              |     | \$0.0                          | _<br>O   |
|                 |                      | ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filin  | 10.   | \$3,212.69            | +   | \$0.00                         | ]=       |
| 11. St<br>Incot | tate<br>clud<br>ther | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing all other regular contributions to the expenses that you de contributions from an unmarried partner, members of your friends or relatives. In the partner is the partner included any amounts already included in lines 2-10 or a lify: | u list in Schedule J. our household, your dependenmounts that are not available | ents, your roommates, | and |                                | _]_      |
|                 |                      | the amount in the last column of line 10 to the amount in that amount on the Summary of Schedules and Statistic.   |   | •                     |     | S                              |          |
| _               | x]^                  | ou expect an increase or decrease within the year after lo.  'es. Explain:   | you file this form?   |                       |     |                                |          |

| FIII IN TH                          | is information to identify   | your case:                         |                                     |  |                   |                                  |
|-------------------------------------|--|------------------------------------|-------------------------------------|--|-------------------|----------------------------------|
| Debtor 1  Debtor 2  (Spouse, if fil |  | Michelle  Middle Name  Middle Name | Faulkner  Last Name  Last Name      |  | •                 | t-petition chapter 13<br>date:   |
| United St<br>Case Nui               |  | e : <u>NORTHERN DISTRICT O</u>     | F ILLINOIS                          | MM / DD /  | YYYY              |                                  |
| (If known)                          |  |                                    | <del>-</del>                        | A congreto   | filing for Dobtor | 2 hoogung Dobtor 2               |
| Official                            | Form 106J  |                                    |                                     |  | separate house    | 2 because Debtor 2 ehold.        |
| Sched                               | ule J: Your E  | xpenses                            |                                     |  |                   | 12/14                            |
| -                                   |  |                                    | = =                                 | e equally responsible for supplyi<br>s, write your name and case nun | =                 |                                  |
| Part 1:                             | Describe Your Househo  | old                                |                                     |  |                   |                                  |
| ΧN                                  | a joint case?  o. Go to line 2.  es. Does Debtor 2 live in  No.  Yes. Debtor 2 n | a separate household?              | e J.                                |  |                   |                                  |
|                                     | ou have dependents? ot list Debtor 1 and   | No X Yes. Fill out                 | this information for                | Dependent's relationship to<br>Debtor 1 or Debtor 2                  | Dependent's age   | Does dependent live with you?    |
| Debt                                | or 2.  | each depend                        | dent                                | Daughter   | 16                | No X Yes                         |
| Do n<br>name                        | ot state the dependents'<br>es.  |                                    |                                     | Daughter   | 9                 | No X Yes                         |
|                                     |  |                                    |                                     | Niece  | 18                | No X Yes X No Yes X No Yes X Yes |
| expe                                | our expenses include<br>enses of people other that<br>self and your dependent    |                                    |                                     |  |                   |                                  |
| Part 2:                             | Estimate Your Ongoing  |                                    |                                     |  |                   | _                                |
| expenses a                          | as of a date after the banable date.   |                                    | supplemental <i>Schedule J</i> , cl | as a supplement in a Chapter 13 heck the box at the top of the for   | -                 |                                  |
| 1                                   | -  | =                                  | Income (Official Form 106I.)        |  |                   | Your expenses                    |
| any                                 | rental or home ownershi<br>rent for the ground or lot.<br>of included in line 4: | p expenses for your reside         | ence. Include first mortgage p      | payments and   | 4.                | \$1,225.00                       |
| 4a.                                 | Real estate taxes  |                                    |                                     |  | 4a.               | \$0.00                           |
| 4b.                                 | Property, homeowner's,   | or renter's insurance              |                                     |  | 4b.               | \$0.00                           |
| 4c.<br>4d.                          | Home maintenance, rep Homeowner's association                                    | air, and upkeep expenses           |                                     |  | 4c.<br>4d.        | \$0.00<br>\$0.00                 |
| ти.                                 |  | 5557111114111 4465                 |                                     |  | ти.               | <del></del>                      |

Case 16-82280 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Doc 1 Document Faulkner Page 34 of 61

Tiffany Debtor 1

Michelle First Name Middle Name Last Name Case Number (if known) \_

|   |                             | Your expen                       | ses                                 |
|---|-----------------------------|----------------------------------|-------------------------------------|
| Additional Mortgage payments for your residence, such as home equity loans                            | 5.                          |                                  | \$0.00                              |
| Utilities:  |                             |                                  |                                     |
| 6a. Electricity, heat, natural gas  | 6a.                         |                                  | \$180.00                            |
| 6b. Water, sewer, garbage collection  | 6b.                         |                                  | \$25.00                             |
| 6c. Telephone, cell phone, internet, satellite, and cable service                                     | 6c.                         |                                  | \$250.00                            |
| 6d. Other. Specify:   | 6d.                         | \$                               | 0.00                                |
| Food and housekeeping supplies  | 7.                          |                                  | \$450.00                            |
| Childcare and children's education costs  | 8.                          |                                  | \$25.00                             |
| Clothing, laundry, and dry cleaning   | 9.                          |                                  | \$45.00                             |
| Personal care products and services   | 10.                         |                                  | \$20.00                             |
| Medical and dental expenses   | 11.                         |                                  | \$25.00                             |
| Transportation. Include gas, maintenance, bus or train fare.  | 12.                         |                                  | \$150.00                            |
| Do not include car payments.  |                             |                                  |                                     |
| . Entertainment, clubs, recreation, newspapers, magazines, and books                                  | 13.                         |                                  | \$0.00                              |
| Charitable contributions and religious donations  | 14.                         |                                  | \$0.00                              |
| . Insurance.  |                             |                                  |                                     |
| Do not include insurance deducted from your pay or included in lines 4 or 20.                         |                             |                                  |                                     |
| 15a. Life insurance   | 15a.                        |                                  | \$0.00                              |
| 15b. Health insurance   | 15b.                        |                                  | \$0.00                              |
| 15c. Vehicle insurance  | 15c.                        |                                  | \$90.00                             |
| 15d. Other insurance. Specify:  | 15d.                        |                                  | \$0.00                              |
| . Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.                    |                             |                                  |                                     |
| Specify:  | 16.                         |                                  | \$0.00                              |
| . Installment or lease payments:  |                             |                                  |                                     |
| 17a. Car payments for Vehicle 1   | 17a.                        |                                  | \$450.26                            |
| 17b. Car payments for Vehicle 2   | 17b.                        |                                  | \$0.00                              |
| 17c. Other. Specify:  | 17c.                        |                                  | \$0.00                              |
| 17d. Other. Specify:  | 17d.                        |                                  | \$0.00                              |
| . Your payments of alimony, maintenance, and support that you did not report as deducted              |                             |                                  |                                     |
| from your pay on line 5, Schedule I, Your Income (Official Form 106I).                                | 18.                         |                                  | \$0.00                              |
| Other payments you make to support others who do not live with you.                                   |                             |                                  |                                     |
| Specify:  | 19.                         |                                  | \$0.00                              |
| Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. |                             |                                  |                                     |
| 20a. Mortgages on other property  | 20a.                        |                                  | \$ 0.00                             |
| 20b. Real estate taxes  | 20b.                        | \$                               | 0.00                                |
| 20c. Property, homeowner's, or renter's insurance   | 20c.                        | \$                               | 0.00                                |
| 20d. Maintenance, repair, and upkeep expenses   | 20d.                        | \$                               | 0.00                                |
| 20e. Homeowner's association or condominium dues  | 20e.                        | \$                               | 0.00                                |
| 20d. Maintenance,   | repair, and upkeep expenses | repair, and upkeep expenses 20d. | repair, and upkeep expenses 20d. \$ |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 35 of 61 Case Number (if known)

| Deptor | Illian  | y WHOTICH                                | 1 ddikiici                       | Case Number (if known) |               |            |  |
|--------|---|--|----------------------------------|------------------------|---------------|------------|--|
|        | First Nar   | ne Middle Name                           | Last Name                        |                        |               |            |  |
| 21.    | Other. S  | pecify: Postage/Bank Fees (\$2.00),      |                                  | _                      | 21.           | \$2.00     |  |
| 22     | Your moi  | nthly expense: Add lines 4 through 21.   |                                  |                        | 22.           | \$2,937.26 |  |
|        | The resul   | t is your monthly expenses.              |                                  |                        |               |            |  |
|        |   |  |                                  |                        |               |            |  |
|        |   |  |                                  |                        |               |            |  |
| 23.    | Calculate   | your monthly net income.                 |                                  |                        |               |            |  |
|        | 23a.  | Copy line 12 (your comibined monthly in  | come) from Schedule I.           |                        | 23a.          | \$3,212.69 |  |
|        | 23b.  | Copy your monthly expenses from line 2   | 22 above.                        |                        | 23b. <b>-</b> | \$2,937.26 |  |
|        | 23c.  | Subtract your monthly expenses from your | our monthly income.              |                        | 23c.          | \$275.43   |  |
|        |   | The result is your monthly net income.   |                                  |                        |               |            |  |
|        |   |  |                                  |                        |               |            |  |
|        |   |  |                                  |                        |               |            |  |
|        |   |  |                                  |                        |               |            |  |
|        |   |  |                                  |                        |               |            |  |
| 24.    | Do you o  | xpect an increase or decrease in your ex | nancas within the year after you | file this form?        |               |            |  |
| 24.    | -   |  | •                                |                        |               |            |  |
|        | For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? |  |                                  |                        |               |            |  |
|        | X No  | ,,,                                      |                                  | ,                      |               |            |  |
|        | Yes.  | Explain Here:                            |                                  |                        |               |            |  |
|        | 163.  | Explain Flere.                           |                                  |                        |               |            |  |
|        |   |  |                                  |                        |               |            |  |
|        |   |  |                                  |                        |               |            |  |
|        |   |  |                                  |                        |               |            |  |
|        |   |  |                                  |                        |               |            |  |

 Official Form 106J
 Record #
 716827
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this information to identify your case: |            |                                   |                     |  |
|---|------------|-----------------------------------|---------------------|--|
| Debtor 1  | Tiffany    | Michelle                          | Faulkner            |  |
|   | First Name | Middle Name                       | Last Name           |  |
| Debtor 2  |            |                                   |                     |  |
| (Spouse, if filing)                             | First Name | Middle Name                       | Last Name           |  |
| United States Case Number (If known)            |            | the : <u>NORTHERN</u> District of | ILLINOIS<br>(State) |  |

# Official Form 106 Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NOT ar                 | n attorney to help you fill out bankruptcy forms?   |
| Yes. Name of Person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
| Under penalty of perjury, I declare that I have read the correct. | he summary and schedules filed with this declaration and that they are true and               |
| ★ /s/ Tiffany Michelle Faulkner                                   | <b>x</b>  |
| Signature of Debtor 1   | Signature of Debtor 2   |
| Date 09/23/2016<br>MM / DD / YYYY                                 | Date  |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 37 of 61

| Fill in this in           | formation to ide   | ntify your case:                                 |           |
|---------------------------|--------------------|--|-----------|
| riii iii tiiis iii        | normation to lue   | ntilly your case.                                |           |
| Debtor 1                  | Tiffany            | Michelle   | Faulkner  |
|                           | First Name         | Middle Name                                      | Last Name |
| Debtor 2                  |                    |  |           |
| (Spouse, if filing)       | First Name         | Middle Name                                      | Last Name |
| United States             | Bankruptey Court t | or the : <u>NORTHERN</u> District of <u>IL</u>   | LINOIS    |
| Office Otates             | Dankruptcy Court   | of the . <u>Northerna</u> District of <u>lie</u> | (State)   |
| Case Number<br>(If known) | ī                  |  |           |

### Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case

| O1. What is your current marital status?  Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No.  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.                        |          |
|---|----------|
| 01. What is your current marital status?  Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No.   |          |
| Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No.   |          |
| Not married  During the last 3 years, have you lived anywhere other than where you live now?  No.   |          |
| 02 During the last 3 years, have you lived anywhere other than where you live now?  \[ \sum_{No.} \]  |          |
| □ No.   |          |
| □ No.   |          |
|   |          |
| Tes. List all of the diaces you lived in the last 3 years. Do not include where you live now.   |          |
| ,,  |          |
| Debtor 1 Debtor 2: Dates De   | btor 2   |
| lived there   | е        |
| Same as Debtor 1 Same as  | Debtor 1 |
| 1960 E 73Rd PI FROM 03/2010   |          |
| Chicago IL 60649-3110 To 09/2013  |          |
|   |          |
|   |          |
| Same as Debtor 1 Same as  | Debtor 1 |
| 7700 S Vernon Ave FROM 11/2013  |          |
| Chicago IL 60619-2923 To 10/2014  |          |
|   |          |
|   |          |
|   |          |
| 03 Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, |          |
| and Wisconsin.)   |          |
| ■ No.   |          |
| Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  |          |
|   |          |
| Part 24 Explain the Sources of Your Income  |          |
|   |          |
|   |          |
|   |          |
|   |          |
|   |          |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 38 of 61

Faulkner Debtor 1 Tiffany Michelle Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$33,409 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$41,107 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, \$44,022 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 39 of 61

| Debtor | 1 Tiffany         | Michelle   | Faulkner              |                             | Case Number (if known)       |                          |
|--------|-------------------|--|-----------------------|-----------------------------|------------------------------|--------------------------|
|        | First Name        | Middle Name  | Last Name             |                             |                              |                          |
| 06     | Are either Debt   | or 1's or Debtor 2's debts primarily co  | nsumer debts?         |                             |                              |                          |
| l .    | _                 |  |                       |                             |                              |                          |
| l      |                   | Debtor 1 nor Debtor 2 has primarily c  |                       |                             | ned in 11 U.S.C. § 101(8) a  | as                       |
|        |                   | ed by an individual primarily for a person   |                       | • •                         | 205*                         |                          |
|        | During            | the 90 days before you filed for bankrup   | itcy, did you pay an  | y creditor a total of \$6,2 | 225° or more?                |                          |
|        | П №               | . Go to line 7.  |                       |                             |                              |                          |
|        |                   | . 66 to line 7.  |                       |                             |                              |                          |
|        | ☐ Ye              | s. List below each creditor to whom you  | paid a total of \$6,2 | 25* or more in one or n     | nore payments and the        |                          |
|        | tota              | al amount you paid that creditor. Do not   | include payments f    | or domestic support ob      | oligations, such as          |                          |
|        | chi               | ld support and alimony. Also, do not inc   | lude payments to a    | n attorney for this bank    | ruptcy case.                 |                          |
|        | * Subject to      | adjustment on 4/01/16 and every 3 year   | rs after that for cas | es filed on or after the    | date of adjustment.          |                          |
| ١.     | Voc Debte         | or 1 or Debtor 2 or both have primarily  | oonoumer debte        |                             |                              |                          |
| '      | _                 | g the 90 days before you filed for bankru  |                       | ny creditor a total of \$6  | 600 or more?                 |                          |
|        |                   | . Go to line 7.  | proj, ala jeu paj a   | , ordanor a total or vo     |                              |                          |
|        | ∐ NO              | . Go to line 7.  |                       |                             |                              |                          |
|        | ■ Ye              | s. List below each creditor to whom you  | paid a total of \$600 | or more and the total       | amount you paid that         |                          |
|        | <del></del>       | editor. Do not include payments for dome   |                       |                             |                              |                          |
|        | alir              | mony. Also, do not include payments to   | an attorney for this  | bankruptcy case.            | •                            |                          |
|        |                   |  |                       |                             |                              |                          |
|        |                   |  | Dates of              | Total amount paid           | Amount you still             | owe Was this payment for |
|        |                   |  | payments              |                             |                              |                          |
|        |                   |  |                       |                             |                              |                          |
|        |                   | Prestige Financial SVC 1420 S  | Monthly               | \$450                       | \$18,982                     | Mortgage                 |
|        |                   | 500 W Salt Lake City UT 84115  |                       |                             |                              | Car                      |
|        |                   | · · · · · · · · · · · · · · · · · · ·  |                       |                             |                              | Credit card              |
|        |                   |  |                       |                             |                              | Loan repayment           |
|        |                   |  |                       |                             |                              | Suppliers or vendors     |
|        |                   |  |                       |                             |                              | Other                    |
|        |                   |  |                       |                             |                              |                          |
|        |                   |  |                       |                             |                              |                          |
| 07 \   |                   | fore the forebook when did to the  | -1                    |                             | b in-side-0                  |                          |
|        | -                 | fore you filed for bankruptcy, did you ma<br>your relatives; any general partners; rel |                       |                             |                              | ral partner;             |
| 0      | corporations of v | which you are an officer, director, person   | n in control, or owne | er of 20% or more of the    | eir voting securities; and a | ny managing              |
|        |                   | one for a business you operate as a solpport and alimony.                              | le proprietor. 11 U.  | S.C. § 101. Include pay     | ments for domestic suppor    | rt obligations,          |
|        | No.               |  |                       |                             |                              |                          |
| li     |                   | payments to an insider.  |                       |                             |                              |                          |
| ļ '    |                   | ,  | Dates of              | Total amount                | Amount you still             | Reason for this payment  |
|        |                   |  | payment               | paid                        | owe                          |                          |
| 00 1   | N/:+h::- 1 h      | fore the forebook when did to the  | -1                    |                             |                              | h a sa a Cita al         |
|        | n insider?        | fore you filed for bankruptcy, did you ma  | ake any payments t    | or transfer any property    | on account of a debt that    | beriented                |
| I      | nclude paymen     | ts on debts guaranteed or cosigned by a  | an insider.           |                             |                              |                          |
|        | No.               |  |                       |                             |                              |                          |
| [      | Yes. List all     | payments to an insider.  |                       |                             |                              |                          |
|        |                   |  | Dates of              | Total amount                | Amount you still             | Reason for this payment  |
|        |                   |  | payment               | paid                        | owe                          | Include creditor's name  |
| Pai    | t 4: Identify     | Legal actions, Repossessions, and Fore   | closures              |                             |                              |                          |
|        |                   |  |                       |                             |                              |                          |
|        |                   |  |                       |                             |                              |                          |
|        |                   |  |                       |                             |                              |                          |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 40 of 61

| Debto | r 1    | Tiffany                                      | Michelle   | Faulkner                        | Case Number (if kno  | own)                     |   |
|-------|--------|--|--|---------------------------------|--|--------------------------|---|
|       |        | First Name                                   | Middle Name  | Last Name                       |  |                          |   |
| 09    | List   |  | ing personal injury cases, s                             |                                 | action, or administrative proceeding collection suits, paternity actions, si |                          |   |
|       |        | No.  |  |                                 |  |                          |   |
|       |        | Yes. Fill in the details.                    |  |                                 |  |                          |   |
|       |        |  |  | Nature of the case              | Court or agency  |                          | Status of the case                          |
| 10    | Che    | ck all that apply and fill                   |  | of your property repossessed    | , foreclosed, garnished, attached, se  | eized, or levied?        |   |
|       | _      | No. Go to line 11 Yes. Fill in the informati | on below.  |                                 |  |                          |   |
| 11    |        |  | filed for bankruptcy, did a<br>ent because you owed a d  |                                 | k or financial institution, set off an                                       | y amounts from y         | our accounts                                |
|       |        | No. Go to line 11                            |  |                                 |  |                          |   |
|       |        | Yes. Fill in the informati                   | on below.  |                                 |  |                          |   |
| 12    |        | -  | led for bankruptcy, was an<br>a custodian, or another of |                                 | ssession of an assignee for the be   | nefit of creditors,      | a   |
|       | ■ N    |  |  |                                 |  |                          |   |
| D     | art 5: | List Certain Gifts a                         | nd Contributions   |                                 |  |                          |   |
|       |        |  | filed for bankruptcy, did v                              | you give any gifts with a total | value of more than \$600 per perso   | on?                      |   |
|       | _      |  |  | ou go u, go u totu.             | Tallo of more than 4000 per period   |                          |   |
|       | =      | No.  | and all alf  |                                 |  |                          |   |
|       | _      | Yes. Fill in the details fo                  | <del>-</del>   |                                 |  |                          |   |
| 14    | With   | iin 2 years before you                       | filed for bankruptcy, did y                              | ou give any gifts or contribu   | tions with a total value of more tha   | in \$600 to any ch       | arity?                                      |
|       | 1      | No.  |  |                                 |  |                          |   |
|       |        | Yes. Fill in the details fo                  | or each gift.  |                                 |  |                          |   |
|       |        |  |  |                                 |  |                          |   |
| P     | art 6: | List Certain Losses                          | 3  |                                 |  |                          |   |
| 15    |        | nin 1 year before you fi<br>bling?           | led for bankruptcy or sinc                               | ce you filed for bankruptcy, d  | id you lose anything because of th   | neft, fire, other dis    | saster, or                                  |
|       |        | No.  |  |                                 |  |                          |   |
|       |        | Yes. Fill in the details fo                  | or each gift.  |                                 |  |                          |   |
|       |        | _  |  |                                 |  |                          |   |
| P     | art 7: | List Certain Payme                           | nts or Transfers   |                                 |  |                          |   |
| 16    | With   | in 1 year hefore you fi                      | led for hankruntey, did vo                               | u or anyone else acting on v    | our behalf pay or transfer any pro   | nerty to anyone v        | OII   |
|       | cons   | sulted about seeking b                       | ankruptcy or preparing a                                 | bankruptcy petition?            | ies for services required in your b  | . , , ,                  | ou  |
|       | П      | No.  |  |                                 |  |                          |   |
|       | _      | Yes. Fill in the details                     |  |                                 |  |                          |   |
|       | F      | Party Contact Info                           |  | Description and value of ar     | ny property transferred  | Date payment or transfer | Amount of payment                           |
|       |        | Geraci Law L.L.C.                            |  |                                 |  |                          | Payment/Value:                              |
|       |        | 55 E. Monroe Street #                        | 3400   |                                 |  |                          | \$4,000.00: \$0.00                          |
|       |        | Chicago,IL 60603                             |  |                                 |  |                          | paid prior to filing,<br>balance to be paid |
|       |        |  |  |                                 |  |                          | through the plan.                           |
|       |        |  |  |                                 |  |                          |   |
|       |        |  |  |                                 |  |                          |   |
|       |        |  |  |                                 |  |                          |   |
|       |        |  |  |                                 |  |                          |   |
|       |        |  |  |                                 |  |                          |   |
|       |        |  |  |                                 |  |                          |   |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 41 of 61

 Debtor 1
 Tiffany
 Michelle
 Faulkner
 Case Number (if known)

 First Name
 Middle Name
 Last Name

|    | Party Contact Info   | Description and value of               | any property transferred    | Date paym<br>or transfer               |                       |  |  |  |  |
|----|--|--|-----------------------------|--|-----------------------|--|--|--|--|
|    | Hananyill Credit Counceling  | Credit Counseling Services             | <u> </u>                    | 2016                                   | \$25.00               |  |  |  |  |
|    | Hananwill Credit Counseling  115 N. Cross St.  | -                                      |                             | 2010                                   | Ψ23.00                |  |  |  |  |
|    | Robinson, IL 62454   | -                                      |                             |  |                       |  |  |  |  |
|    | TODINSON, IL 02404   | -                                      |                             |  |                       |  |  |  |  |
|    |  | -                                      |                             |  |                       |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |
| 17 | Within 1 year before you filed for bankrupton<br>promised to help you deal with your creditor<br>Do not include any payment or transfer that   | rs or to make payments to your cre     |                             | fer any property to any                | one who               |  |  |  |  |
|    | No.  |  |                             |  |                       |  |  |  |  |
|    | Yes. Fill in the details.  |  |                             |  |                       |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |
| 18 | transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). |  |                             |  |                       |  |  |  |  |
|    | Do not include gifts and transfers that you h  | iave aireauy iisted on this statemen   | ı.                          |  |                       |  |  |  |  |
|    | No.  |  |                             |  |                       |  |  |  |  |
|    | Yes. Fill in the details for each gift.  |  |                             |  |                       |  |  |  |  |
| 19 | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-p  |  | o a self-settled trust or s | imilar device of which                 | you are a             |  |  |  |  |
|    | No.  |  |                             |  |                       |  |  |  |  |
|    | Yes. Fill in the details for each gift.  |  |                             |  |                       |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |
| P  | List Certain Financial Accounts, Instru  | uments, Safe Deposit Boxes, and Stor   | age Units                   |  |                       |  |  |  |  |
| 20 | Within 1 year before you filed for bankrupto<br>sold, moved, or transferred?<br>Include checking, savings, money market, o<br>houses, pension funds, cooperatives, assoc   | or other financial accounts; certifica | tes of deposit; shares in   | · ·                                    |                       |  |  |  |  |
|    | ■ No.  Yes. Fill in the details.   |  |                             |  |                       |  |  |  |  |
|    |  | Last 4 digits of account number        | Type of account or          | Date account was                       | Last balance before   |  |  |  |  |
|    |  |  | instrument                  | closed, sold, moved,<br>or transferred | closing or transfer   |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |
| 21 | Do you now have, or did you have within 1 y cash, or other valuables?  | ear before you filed for bankruptcy    | , any safe deposit box o    | r other depository for s               | ecurities,            |  |  |  |  |
|    | No.  |  |                             |  |                       |  |  |  |  |
|    | Yes. Fill in the details.  |  |                             |  |                       |  |  |  |  |
|    | _  | Who else had access to it?             | Describe the content        | nts                                    | Do you still          |  |  |  |  |
| 22 | Have you stored property in a stores!t   | or place other than your barre!!!      | n 4 waar hafers was filed   | for bankrupter 2                       | have it?              |  |  |  |  |
|    | Have you stored property in a storage unit o   | or place other than your nome with     | ii i year belore you filed  | тог рапктиртсу?                        |                       |  |  |  |  |
|    | No.  |  |                             |  |                       |  |  |  |  |
|    | Yes. Fill in the details.  | Who else has or had access to it?      | Describe the conte          | nte                                    | Do you still          |  |  |  |  |
|    | <u></u>  | with else has of had access to it?     | Describe the conte          | 113                                    | Do you still have it? |  |  |  |  |
| P  | art9: Identify Property You Hold or Control  | for Someone Else                       |                             |  |                       |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |
|    |  |  |                             |  |                       |  |  |  |  |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 42 of 61

| Debtor      | 1 Tiffany                          | Michelle  | Faulkner  | Case Number (if known)  |                    |
|-------------|------------------------------------|---|---|---|--------------------|
|             | First Name                         | Middle Name   | Last Name   |   |                    |
|             | Oo you hold or control of someone. | any property that someon  | e else owns? Include any property                             | you borrowed from, are storing for, or ho   | d in trust         |
|             | No.                                |   |   |   |                    |
| [           | Yes. Fill in the details           | S.  |   |   |                    |
|             |                                    | Whe   | re is the property?   | Describe the property   | Value              |
| Par         | Give Details Abo                   | out Environmental Informati                                     | on  |   |                    |
| For t       | he purpose of Part 10,             | the following definitions a                                     | pply:   |   |                    |
| h           | azardous or toxic subs             | tances, wastes, or materia                                      | =   | g pollution, contamination, releases of<br>ater, groundwater, or other medium,<br>s, or material. |                    |
|             |                                    | , facility, or property as de<br>te, or utilize it, including d |   | v, whether you now own, operate, or utilize   | 1                  |
|             |                                    | ns anything an environme<br>naterial, pollutant, contami        | ental law defines as a hazardous w<br>inant, or similar term. | aste, hazardous substance, toxic  |                    |
| Repo        | ort all notices, releases,         | and proceedings that you  | u know about, regardless of when                              | they occurred.  |                    |
| 24 <b>F</b> | Has any governmental (             | unit notified you that you                                      | may be liable or potentially liable u                         | inder or in violation of an environmental la  | w?                 |
| ļ           | No.                                |   |   |   |                    |
| [           | Yes. Fill in the details           |   |   |   |                    |
|             |                                    | Gove  | ernmental unit  | Environmental law, if you know it   | Date of notice     |
| 25 <b>F</b> | Have you notified any g            | overnmental unit of any r                                       | elease of hazardous material?                                 |   |                    |
|             | No.                                |   |   |   |                    |
| ĺ           | Yes. Fill in the details           | S.  |   |   |                    |
|             |                                    | Gove  | ernmental unit  | Environmental law, if you know it   | Date of notice     |
| 26 <b>F</b> | lave you been a party i            | n any judicial or administ                                      | rative proceeding under any enviro                            | onmental law? Include settlements and ord   | lers.              |
|             | No.  Yes. Fill in the details      |   |   |   |                    |
| '           | Tes. I ili ili tile details        |   | t or agency   | Nature of the case  | Status of the case |
|             |                                    |   |   |   |                    |
| Part        | Give Details Abo                   | out Your Business or Conne                                      | ctions to Any Business  |   |                    |
| 27 <b>V</b> | Nithin 4 years before ye           | ou filed for bankruptcy, di                                     | d you own a business or have any                              | of the following connections to any busin   | ess?               |
|             | A sole proprieto                   | r or self-employed in a tra                                     | de, profession, or other activity, ei                         | ther full-time or part-time   |                    |
|             | A member of a li                   | mited liability company (L                                      | LC) or limited liability partnership                          | (LLP)   |                    |
|             | ∐A partner in a pa                 | -   |   |   |                    |
|             | <u> </u>                           | tor, or managing executive                                      |   |   |                    |
|             | ∐An owner of at le                 | east 5% of the voting or ed                                     | quity securities of a corporation                             |   |                    |
|             | No. None of the above              | ve applies. Go to Part 12.                                      |   |   |                    |
| [           | Yes. Check all that a              | pply above and fill in the de                                   | etails below for each business.                               |   |                    |
|             | Nithin 2 years before you          |   | d you give a financial statement to                           | anyone about your business? Include all   | financial          |
|             | No.                                |   |   |   |                    |
| [           | Yes. Fill in the details           |   |   |   |                    |
|             |                                    | Date i  | ssued   |   |                    |
|             |                                    |   |   |   |                    |
|             |                                    |   |   |   |                    |
|             |                                    |   |   |   |                    |
|             |                                    |   |   |   |                    |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 43 of 61

|  | airs and any attachments, and I declare under penalty of perjury that the alse statement, concealing property, or obtaining money or property by fraud to \$250,000, or imprisonment for up to 20 years, or both. |
|--|---|
| ✗ /s/ Tiffany Michelle Faulkner                            | <b>×</b>  |
| Signature of Debtor 1                                      | Signature of Debtor 2   |
| Date 09/23/2016<br>MM / DD / YYYY                          | Date  |
| Did you attach additional pages to Your Statement of Final | ncial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  |
| No   |   |
| Yes  |   |
| Did you pay or agree to pay someone who is not an attorned | ey to help you fill out bankruptcy forms?   |
| No   |   |
| Yes. Name of person  | Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).  |
|  |   |

Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Case 16-82280 Document Page 44 of 61

B2030 (Form 2030) (12/15)

Date

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

| Inı | ·e   |                 | TOTALIBRA DISTRA   |                            | 21210 ( 21 ( 1210     | 511                   |          |
|-----|------|-----------------|--|----------------------------|-----------------------|-----------------------|----------|
| Tif | any  | Michell         | le Faulkner / Debtor   |                            | Case No:              |                       |          |
|     |      |                 |  |                            | Chapter:              | Chapter 13            |          |
|     |      |                 | DISCLOSURE OF COM  | PENSATION OF ATTO          | ORNEY FOR DEB         | STOR                  |          |
|     | nper | sation p        | o 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), aid to me within one year before the filing of the e rendered on behalf of the debtor(s) in contemp | petition in bankruptcy,    | or agreed to be paid  | l to me, for servic   | es       |
|     | Fo   | or legal s      | services, I have agreed to accept  | \$4,000.00                 |                       |                       |          |
|     | Pı   | rior to the     | e filing of this statement I have received   | \$0.00                     |                       |                       |          |
|     | В    | alance D        | ue   | \$4,000.00                 |                       |                       |          |
| 2.  | Th   | e source        | of the compensation paid to me was:  |                            |                       |                       |          |
|     |      | Debt            | tor(s) Other: (specify   |                            |                       |                       |          |
| 3.  | Th   | e source        | of compensation to be paid to me is:   |                            |                       |                       |          |
|     |      | Deb             | otor(s) Other: (specify  |                            |                       |                       |          |
| 4.  |      |                 | e not agreed to share the above-disclosed compete law firm.  | nsation with any other pe  | erson unless they are | e members and as      | sociates |
| 5.  |      | of my<br>attach | or the above-disclosed fee, I have agreed to rende   | th a list of the names of  | the people sharing i  | in the compensation   |          |
|     | a.   | Analy           | sis of the debtor's financial situation, and render  | ring advice to the debtor  | in determining whe    | ether to file a petit | tion in  |
|     |      | bankrı          | uptcy;   |                            |                       |                       |          |
|     | b.   | Prepai          | ration and filing of any petition, schedules, states   | ments of affairs and plan  | which may be requ     | iired;                |          |
|     | c.   | Repre           | sentation of the debtor at the meeting of creditor   | s and confirmation heari   | ng, and any adjourn   | ned hearings there    | eof;     |
|     | d.   | Repre           | sentation of the debtor in adversary proceedings   | and other contested ban    | kruptcy matters;      |                       |          |
|     | e.   | [Other          | r provisions as needed]  |                            |                       |                       |          |
| 6.  | Ву   | agreem          | ent with the debtor(s), the above-disclosed fee de   | oes not include the follow | wing service:         |                       |          |
|     |      |                 |  |                            |                       |                       |          |
|     |      | ı               | CE   | RTIFICATION                |                       | 1                     |          |
|     |      |                 | I certify that the foregoing is a complete stapayment to   | atement of any agreemer    | nt or arrangement fo  | or                    |          |
|     |      |                 | me for representation of the debtor(s) in this batched Date: 09/28/2016 /s   | / Marc Adam Affolter       |                       |                       |          |

Page 1 of 1 716827 Record #

Signature of Attorney

Geraci Law L.L.C. Name of law firm

Filed **G9/26/16aw Entere**d 09/28/16 15:08:10 Case 16-82280 Doc 1 Desc Main National Headquarters: 55 E. Monroe[Singett]#ൂക്ക് Chica ഉപ്പെട്ട ഉപ്പട്ട വിട്ട വിട്ട വിട്ട പ്രവാദ ക്രിക്ക് വിട്ട വിട്ട വിട്ട പ്രവാദ പര്യം വിട്ട വിട്ട പര്യം പരവര്യം പര്യം പരവര്യം പരവര്യം പരവര്യം പരവര്യം പരവര്യം പര്യം പരവര്യം പര്യം പരവര്യം പരവര്യം പരവര്യം പര്യം പര്യം പര്യം പര്യം പര്യം പര്യം പര്യം പര്യം പരവര്യം പരവര്യം പരവര്യം പര്യം പര്യം പര്യം പര്യം പര്യം പര്യം പര്യം പരവര്യം പരവര്യം പരവര്യം പര്യം പര്യം പര്യം പരവര്യം പരവര്യം പരവര്യം പരവര്യം പരവര്യം പരവര്യം പര്യം പര്യം പര്യം പരവര്യം പരവര്യം പരവര്യം പരവര്യം പരവര്യം പരവര്യം പര്യം പര്യം പര്യം പരവര്യം പരവര്യം പരവര്യം പര



Date: 8/17/2016

Consultation Attorney: MAA

Record #: 716-827

### Attornev - Client Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment

prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed. No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility. Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter 13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee. PLAN: The plan payment is estimated to be \$\_ per month for months. The payment and length of the plan are based on the information I have provided, including income, expenses, assets and debts. If these amounts are not accurate, my plan payment or duration may need to be increased. In addition, the Court, Chapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I further understand that if my income or expenses change during my Chapter 13, my plan payment may have to change. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what I am listing as debts, what my property is, what my assets are and if they are claimed as exempt, and to make full disclosure. My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other: My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly Debts not discharged if they not paid in full: student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters. If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some or all of the funds into my Chapter 13 plan. I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be closed without a discharge, and I will be required to pay a fee to have it reopened. (Joint Debtor) Tiffany Faulkner (Debtor)

Dated: 8/17/16 Representing Geraci Law L.L.C. Attorney for the Debtor(s)

# UNITED SPATES BANKRUFT CY¹COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main 3. Personally review with the debtor and signification of the collapse of petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



CARA Page 2 of 6

- Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Mail 2. Inform the debtor that the debtor has the pathetual and, 48 the 64se of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.



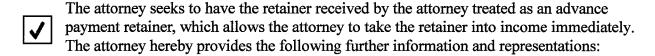
### Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



- Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main (d) Any portion of the retainer that the farmed age full of expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank]



## F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4.000.00

| 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00 |
|---|
| Z. III SUULION, MO CEPTER III— F-7 Mile   |
| 3. Before signing this agreement, the attorney has received ,\$                               |
| toward the flat fee, leaving a balance due of \$ 4,000; and \$ \$ 0 for expenses,             |
| leaving a balance due for the filing fee of \$  |
| . 1.4 and destings hearings or spreaks, the   |

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, application and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 9/26/16

Signed:

Debtor(s)

Co-Debtox(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 52 of 61

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

In re

| Tiffany Michelle Faulkner / Debtor | Bankruptcy Docket #: |
|------------------------------------|----------------------|
|                                    | Judge:               |

### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 09/23/2016 /s/ Tiffany Michelle Faulkner

**Tiffany Michelle Faulkner** 

X Date & Sign

Record # 716827 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

### Document Page 53 of 61

### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

Record # 716827 B 201A (Form 201A) (11/11) Page 1 of 2

#### Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main

Form B 201A, Notice to Consumer Debtor(s)

Document In re Tiffanv

Page 54 of 61

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 09/23/2016 | /s/ Tiffany Michelle Faulkner |   |
|-------------------|-------------------------------|---|
|                   | Tiffany Michelle Faulkner     |   |
| Dated: 09/28/2016 | /s/ Marc Adam Affolter        |   |
|                   | Attorney: Marc Adam Affolter  | _ |

# Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 55 of 61

| Debtor 1                         | Tiffany   | Michelle   | Faulkner  | Case Number (if knot  | wn)  |  |
|----------------------------------|---|--|---|---|--|--|
|                                  | First Name  | Middle Name  | Last Name   |   |  |  |
| Part 6.                          | Answer These Question   | s for Reporting Purposes   |   |   |  |  |
|                                  | nat kind of debts do<br>u have?   | as "incurred by  No. Go to li Yes. Go to  16b. Are your deb money for a but  No. Go to li Yes. Go to   | an Individual primarily for a prime 16b. line 17. ts primarily business de siness or investment or through 16c. line 17.  | ebts? Consumer debts are defined personal, family, or household purp ibts? Business debts are debts the ugh the operation of the business of the consumer debts or business debts.  | at you incurred to obtain<br>or investment.  |  |
| Ch<br>Do<br>an<br>ex<br>ad<br>an | e you filing under napter 7?  you estimate that after by exempt property is cluded and iministrative expenses e paid that funds will be aliable for distribution unsecured creditors? | —<br>□Yes. I am filino   | iling under Chapter 7. Go to<br>under Chapter 7. Do you e<br>ative expenses are paid that   | n line 18.<br>stimate that after any exempt prop<br>funds will be available to distribute   | erty is excluded and<br>to unsecured creditors?  |  |
| yo                               | ow many creditors do<br>u estimate that you<br>ve?  | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999  | <b>□</b> 5,00   | 00-5,000<br>01-10,000<br>001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000   |  |
| . es                             | ow much do you<br>fimate your assets to<br>e worth?   | \$0-\$50,000<br>\$50,001-\$100,0<br>\$100,001-\$500<br>\$500,001-\$1 m   | 000   | 000,001-\$10 million<br>0,000,001-\$50 million<br>0,000,001-\$100 million<br>10,000,001-\$500 million   | ☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion                      |  |
| es                               | ow much do you<br>timate your liabilities<br>be?  | □ \$0-\$50,000<br>■ \$50,001-\$100,0<br>□ \$100,001-\$500<br>□ \$500,001-\$1 m   | 000   | 000,001-\$10 million<br>0,000,001-\$50 million<br>0,000,001-\$100 million<br>00,000,001-\$500 million   | ☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion                      |  |
| Part 7:                          | 6ign Below  |  |   |   |  |  |
| For you                          |   | if I have chosen to fill of title 11, United Staunder Chapter 7.  If no attorney represents document, I have I request relief in accument, I understand making | e under Chapter 7, I am awa<br>ites Code. I understand the r<br>ents me and I did not pay or<br>e obtained and read the notic<br>cordance with the chapter of<br>a false statement, concealing<br>se can result in fines up to \$<br>441, 1519, and 3571. | r penalty of perjury that the information are that I may proceed, if eligible, unrelief available under each chapter, agree to pay someone who is not accerequired by 11 U.S.C. § 342(b). title 11, United States Code, specifing property, or obtaining money or [250,000, or imprisonment for up to Signature | and I choose to proceed  an attorney to help me fill out  fied in this petition.  property by fraud in connection 20 years, or both. |  |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 56 of 61

| Fill in this in  | formation to iden     | tify your case.         |           |   |
|--|-----------------------|-------------------------|-----------|---|
| Debtor 1   | Tiffany<br>First Name | Michelle<br>Middle Name | Faulkner  | _ |
| Debtor 2   | FIRE NAME             | MIDDE NOTH              | Last Name | _ |
| (Spouse, if filing)  | First Name            | Middle Name             | Last Name |   |
| United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State) |                       |                         |           |   |
| Case Number<br>(If known)  |                       |                         | _         |   |

### Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |                                |  |  |  |  |  |
|---|--------------------------------|--|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |                                |  |  |  |  |  |
| ■ No  | , to neep you in our build up. | <b>.</b>   |  |  |  |  |
| Yes. Name of Person   |                                | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).  |  |  |  |  |
| •   |                                |  |  |  |  |  |
|   |                                |  |  |  |  |  |
| No. of column 1 de days that have and the surround  |                                | Make dealers and the state of t |  |  |  |  |
| Under penalty of perjury, I declare that I have read the summa correct.                           | iry and schedules filed with t | nis declaration and that they are true and   |  |  |  |  |
|   | <u></u>                        |  |  |  |  |  |
| Signature of Debtor 1   | Signature of Debtor 2          |  |  |  |  |  |
| Date 89 12-3/2016   | Date                           |  |  |  |  |  |
| MM / DD / YYYY  | MM / DD / YY                   | <del>YY</del>  |  |  |  |  |
|   |                                |  |  |  |  |  |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 57 of 61

|  | Tiffany    | Michelle    | Faulkner  | Case Number (if known) |
|--|------------|-------------|-----------|------------------------|
|  | First Name | Middle Name | Lust Name |                        |

| Part 12: Sign Below  |  |  |  |  |  |
|--|--|--|--|--|--|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571. |  |  |  |  |  |
| Signature of Debtor 2  |  |  |  |  |  |
| Date   |  |  |  |  |  |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  |  |  |  |  |  |
| M No   |  |  |  |  |  |
| Yes  |  |  |  |  |  |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  |  |  |  |  |  |
| ■ No   |  |  |  |  |  |
| Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).   |  |  |  |  |  |

### **DISCLAIMER** Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or enlityin connection with a separation adreement. divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-eligners are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-eignors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1940 type tax) can be discharged if the following four rules are met: (1), The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filling spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filling spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors, a. income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 80 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others. a. Benefit, overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be vold after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.

18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if liver nave excess income, or change in State, Federal or Bankruptcy laws before the case

| is filed in Court and WE HAVE TO READ, CHECK<br>Dated: 2/23/2016 | C. & MAKE SUR | OUR PETITIO | N IS ACCURATEIIII | X Pate & Sign |
|--|---------------|-------------|-------------------|---------------|
|  |               | Tiffan      | Michelle Faulkner |               |

Case 16-82280 Doc 1 Filed 09/28/16 Entered 09/28/16 15:08:10 Desc Main Document Page 59 of 61

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

in re

Tiffany Michelle Faulkner / Debtor

Bankruptcy Docket #:

Judge:

### Werie Cation of Creditor Waterx

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Dated: 9133/2016

Tiffany Michelle Faulkner

X.Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Sign Below

declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Tiffany Michelle Faulkner

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Form B 201A, Notice to Consumer Debtor(s)

in re Tiffany Michelle Faulkner / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your sankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 1 / 3 / 2016

Tiffany Michelle Faulkner

X Date & Sign

Dated: 1 / 23/2016

Attorney: Marc Adam Affolter